

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 713493

1. Entity Name

JUNIOR LEAGUE OF CENTRAL & NORTH BREVARD, INC.

Principal Place of Business

442 MAGNOLIA AVE.
APT. 25
MERRITT ISLAND FL 32952

Mailing Address

P.O. BOX 539
COCOA FL 32923

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7117325

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KALAKAY, DAWN M CPA
832-A ANGELA AVE
ROCKLEDGE FL 32955

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when rechartering)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MOLICA, LINDA 2230 COCONUT LANE MERRITT ISLAND FL 32952	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BAUGHN, VICKI 409 ROCKLEDGE DRIVE ROCKLEDGE FL 32955	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KALAKAY, DAWN 832-A ANGELA AVE ROCKLEDGE FL 32955	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S IVEY, KYMM 3090 WATER OAK DR MERRITT ISLAND FL 32953	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ENLOW, SUSAN 3150 S TROPICAL TRAIL MERRITT ISLAND FL 32952	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BAUGHN VICKI 409 ROCKLEDGE DR ROCKLEDGE, FL 32955	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Jan Seage 27 Oakwood Ave. Rockledge, FL 32955	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Eileen Lundy 240 Alameda Dr. Merritt Island, FL 32952	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Valerie Downs 1470 Polaris Dr Merritt Island, FL	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Kathy Gorenflo 3070 Tropical Tr. Merritt Island 32952	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Linda Molica* *Andrew J. Molitor* 1-13-01 (31)253-3436

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Eileen Lundy

Eileen Lundy

2-21-01

FILED
Mar 01, 2001 8:00 am
Secretary of State

01-31-2001 90016 031 ****61.25

28090 JUVUUS



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)