

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715443

FILED
Feb 21, 2009
Secretary of State

Entity Name: WEST PALM BEACH JAYCEES, INC.

Current Principal Place of Business:

15802 SW MORGAN ST.
INDIANTOWN, FL 34956 US

New Principal Place of Business:

Current Mailing Address:

WPB JC
PO BOX 1094
WEST PALM BEACH, FL 33402 US

New Mailing Address:

FEI Number: 23-7023626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARENTEAU, ALISHIA
15802 SW MORGANS ST
INDIANTOWN, FL 34956 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: MC MUNN, TERRI
Address: 1827 BANYAN CREEK CIR. NO.
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VP () Delete
Name: SCHUMACHER, VICKY
Address: 6296 DANIA STREET
City-St-Zip: JUPITER, FL 33458

Title: TD () Delete
Name: PARENTEAU, ALISHIA U
Address: 15802 SW MORGAN ST
City-St-Zip: INDIANTOWN, FL 34956

Title: D () Delete
Name: LEITE, JESSICA
Address: PO BOX 32488
City-St-Zip: WEST PALM BEACH, FL 33420

Title: D () Delete
Name: URBA, ALANA
Address: 9886 LAKESPUR CIR
City-St-Zip: WEST PALM BEACH, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALISHIA PARENTEAU

TD

02/21/2009

Electronic Signature of Signing Officer or Director

_____ Date