2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State
05-02-2003 90198 014 ****61.25

DOCUMENT # 719315

1. Entity Name
ENGLEWOOD JAYCEES, INC.

Principal Place of Business	Mailing Address
1160 S. MCCALL RD. STE BB ENGLEWOOD, FL 34223	1160 S. MCCALL RD. STE B ENGLEWOOD, FL 34223

2. Principal Place of Business	3. Mailing Address
6430 ROSEWOOD DR	6430 ROSEWOOD DR
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ENGLEWOOD, FL	City & State: ENGLEWOOD, FL
Zip: 34224 Country: USA	Zip: 34224 Country: USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number: 59-2466856 ☐ 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
WELLBAUM, R.W., JR. 1160 S. MCCALL RD. STE B ENGLEWOOD, FL 34223	Name: BUSH, CHARLES Street Address (P.O. Box Number is Not Acceptable): 6430 ROSEWOOD DR City: ENGLEWOOD **FL** Zip Code: 34224

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Charles Bush CHARLES BUSH 4-13-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when signing) 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 Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RUSSELL, DENISE 7323 HEAPFORD TERRACE ENGLEWOOD, FL 33981	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ALEXANDER, REBECCA 10324 GREENWAY AVE ENGLEWOOD, FL 34224	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD BUSH, TAMMY 6430 ROSEWOOD DR ENGLEWOOD, FL 34224	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BUSH, TAMMY 6430 ROSEWOOD DR ENGLEWOOD, FL 34224	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BARNHARD, J R 10493 GREENWAY AVE. ENGLEWOOD, FL 34224	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CODER, LARRY 1161 SHARLO CIR ENGLEWOOD, FL 34224	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MONTGOMERY, TRACY 10309 GREENWAY AVENUE ENGLEWOOD, FL 34224	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MONTGOMERY, TRACY 10309 GREENWAY AVE ENGLEWOOD, FL 34224	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CARDEN, THOMAS 8418 OSPREY RD ENGLEWOOD, FL 34224	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BUSH, CHARLES 6430 ROSEWOOD DR ENGLEWOOD, FL 34224	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P QUINN, LARRY 1309 E VENICE AVE VENICE, FL 34292	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MONTGOMERY, MARTY 10309 GREENWAY AVE ENGLEWOOD, FL 34224	☐ Change ☒ Addition

CR2E037 (10/02)

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: MARTY MONTGOMERY 4/13/03 (941) 473-3463
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #