FILED May 15, 2001 8:00 am §

1. Entity Name						Secretary of State			
JUNIO	R LEAGUE OF GREATER F	ORT LAUDERDALE, INC	C.			05-15-2001 901	17 002 ****6	51.25	
Principal Pla	ace of Business	Mailing Address	<u></u>						
704 S.E. 1ST STREET FT LAUDERDALE FL 33301		704 S.E. 1ST STREET FT LAUDERDALE FL 33301			o o o o o				
						(100)	TA TABA TATA BARA	HANL STATE TERE	
2. Principal Place of Business		3. Mailing Address						(1 1 1) (111) (111)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State		4. FEI Numb	er 59-0932711	├	oplied For		
Zip	Country	Zip	Cour	ntry	5. Certificate	of Status Desired	\$8.75 Ad		
	6. Name and Address of Curre	ent Registered Agent	1		7. Name and	Address of New Register	Fee Require	id	
				Name					
COONEY, MARY			-	Street Address (P.O. Box Number is Not Acceptable)					
704 S.E. 1ST STREET FORT LAUDERDALE FL 33301									
				City		· · · · · · · · · · · · · · · · · · ·	Zip Coo	е	
8. The abov	e named entity submits this statement	t for the purpose of changing its	s registered	d office or i	registered agent, or bo	th, in the state of Florida.			
SIGNATURE		******							
	Signature, typed or printed name of registered ag	ent and title if applicable. (NOT	TE: Registered /	Agent signature	e required when reinstating)	DA*	TE '		
	FILE NOW:	9. Election Campaig	n Financino	1	\$5.00 May Be	Make Cher	k Payable to		
	FEE IS \$61.25	Trust Fund Contrib	_	' _	Added to Fees		ent of State	'	
10.	OFFICERS AND (DIRECTORS	11.		ADDITIONS/CH	ANGES TO OFFICERS AND	DIRECTORS IN	10	
TITLE	PD	Delete	TITLE	į	5D		☐ Change	Addition	
NAME	PAYNE, ANN	, -	NAME	1	Hippler, Car 104 SE 1St	11.	_	,,,	
Street address City-St-Zip	704 SE 1ST ST FT LAUDERDALE FL		STREET CITY-S	ADDRESS T	104 SE 154	> 			
TITLE	VD VD	√ 0-1-1-			7. Laudorda 10	le, FL	• 0		
NAME	FUHY, SUE	Delete	TITLE NAME		airdl, Tigay		Change	☐ Addition	
STREET ADDRESS	704 SE 1ST ST		STREET						
CITY-ST-ZIP	FORT LAUDERDALE FL		JIIICEI	NDBIILOO	104 SE 15-				
TITLE			CITY-S	T-ZIP	Philandordo		· · · · · ·		
	VD WINTEDHOLLED DCT	S eclete	CITY-ST	T-ZIP	104 SE 134 Productivedo 5D		☐ Change	☐ Addition	
	WINTERHOLLER, BET	S-Delete	CITY-SI TITLE NAME	T-ZIP	104 SE 131 Prioudoydo SD Suida, Koth	rle, PL	☐ Change	☐ Addition	
TREET ADDRESS	WINTERHOLLER, BET 704 SE 1ST ST	S aDelete	CITY-SI TITLE NAME	T-ZIP	104 SE 134 Philaudaydo 5D auida, Kath 104 SB (sh	tle, FL Stroet	_ ,	Addition	
TREET ADDRESS	WINTERHOLLER, BET		CITY-ST TITLE NAME STREET CITY-ST	T-ZIP	Ph Laudaydo Fr Laudaydo Souida, Koth 704 88 (st	rle, PL	<u> </u>		
TREET ADDRESS TTY-ST-ZIP	WINTERHOLLER, BET 704 SE 1ST ST FT LAUDERALE FL V SPRAGG, SUSAN	Delete Delete	CITY-SI TITLE NAME STREET	T-ZIP	Priorise 13th Priorise 13th Soundary Control 15th Sentential 1	rle, FL Stroct Woarderdale, A	_ ,	Addition	
STREET ADDRESS SITY-ST-ZIP ITLE IAME TREET ADDRESS	WINTERHOLLER, BET 704 SE 1ST ST FT LAUDERALE FL V SPRAGG, SUSAN 704 SE 1ST ST		CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET STREET	ADDRESS F-ZIP	104 SE 134 Ph Laudoydo Duida, Koth 104 SE 134 PD Jeanne Mino 104 SC 154	vie Fl Stroct Wooderdale, A well'i Street	<u> </u>		
TREET ADDRESS ETY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP	WINTERHOLLER, BET 704 SE 1ST ST FT LAUDERALE FL V SPRAGG, SUSAN 704 SE 1ST ST FT LAUDERDALE FL	Delete	CITY-S' TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-ST	ADDRESS 1- ZIP ADDRESS 1- ZIP	Toy se 1st of Laudaydo SD suida, Kath 704 se 1st of FD Seanne Mino 704 se 1st of Laudayda	vie Fl Stroct Wooderdale, A well'i Street	☐ Change		
STREET ADDRESS SITY-ST-ZIP ITLE IAME TREET ADDRESS SITY-ST-ZIP ITLE	WINTERHOLLER, BET 704 SE 1ST ST FT LAUDERALE FL V SPRAGG, SUSAN 704 SE 1ST ST FT LAUDERDALE FL S		CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE	ADDRESS 1-ZIP ADDRESS 1-ZIP	Toy se 1st pudaydo nuida, Kath 1704 se 1st properties of 1st properties of 1st pudayda	Street Noviderdale, A well'i Street Le, FL	<u> </u>		
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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.

RATIOM NUMBIROUDU TEATRE Minquelli

954-462-1350