2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 26, 2007 8:00 am Secretary of State

DOCUMENT # 721928 1. Entity Name JUNIOR LEAGUE OF GREATER FORT LAUDERDALE, INC.							90071 045 ****	'61.25
Principal Place of Business 704 SOUTHEAST 1ST STREET FORT LAUDERDALE, FL 33301		Mailing Address 704 SOUTHEAST 1ST STREET FORT LAUDERDALE, FL 33301			4530	N/S N/S S N/S S S S S S S	111(8) 8 . 1880	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02122007 CI	ng-NP	CR2E037 (12/06)		
City & State		City & State			4. FEI Number 59-093271	1	 	oplied For
Zip	Country	Zip	Coun	ntry	5. Certificate of St	atus Desired	S8.75 Add Fee Require	ditional
	6. Name and Address of Current 8	Registered Agent			7. Name and Add	ress of New Re	gistered Agent	
GOODCHILD, QUINN F MRS.				Name Kate Lochrie Kovacs				
704 SOUTHEAST 1ST STREET FORT LAUDERDALE, FL 33301				Street Address (P.O. Box Number is Not Acceptable)				
			-	104 City (-1	SE 1st	St.	⊏I Zip Coo	le .
8. The above named entity submits this statement for the purpose of changing its registered office or register					ruderdal (State of Flor	- F⊑ 33	301
	ions of registered agent. Kate Lochr	ie Kovacs			sed agent, or both, in	* * * * * * * * * * * * * * * * * * *	$\frac{2}{2}$	
_	Stgnature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	:Registered /	Agent signature resure	@when reinstating)	 -	DATE	-
L.	Signature, typed or printed name of registered agent a Filling Fee is \$61.25 Due by May 1, 2007	9. Election Cam Trust Fund Co	paign Fin	nancing _	\$5.00 May Be Added to Fees		DATE date the check payable to be department of S	
10.	Filing Fee is \$61.25	9. Election Cam Trust Fund Co	paign Fin	nancing _	\$5.00 May Be Added to Fees	Florid	• •	tate .
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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.

13/07 954-646-6597 SIGNATURE: