

FILE NOW: FILING FEE IS \$61.25

FILED  
Jan 27 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **745391** (3)

1. Corporation Name

**JUNIOR LEAGUE OF MANATEE COUNTY, INC..**

Principal Place of Business

1023 MANATEE AVENUE WEST  
SUITE 709  
BRADENTON FL 34205  
US

Mailing Address

P.O. BOX 960  
BRADENTON FL 34206  
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 28 Country 29 Zip 30 Country

24 25 29 30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/27/1978

4. FEI Number

59-1873975

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes

☒ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME GALVANO, JULIE  
STREET ADDRESS 1023 MANATEE AVENUE WEST  
CITY-ST-ZIP BRADENTON FL

TITLE VTD ☐ DELETE

NAME NOVAK, CONNIE  
STREET ADDRESS 1023 MANATEE AVENUE WEST  
CITY-ST-ZIP BRADENTON FL

TITLE VSD ☐ DELETE

NAME SHEPERD, DARYL  
STREET ADDRESS 1023 MANATEE AVENUE WEST  
CITY-ST-ZIP BRADENTON FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME Laura Seberg  
1.3 STREET ADDRESS 1023 Manatee Ave. W. #709  
1.4 CITY-ST-ZIP Bradenton FL 34205

2.1 TITLE VTD ☒ Change ☐ Addition

2.2 NAME Lisa Johnson  
2.3 STREET ADDRESS 1023 Manatee Ave. W. #709  
2.4 CITY-ST-ZIP Bradenton, FL 34205

3.1 TITLE VSD ☒ Change ☐ Addition

3.2 NAME Robin Thompson  
3.3 STREET ADDRESS 1023 Manatee Ave W. #709  
3.4 CITY-ST-ZIP Bradenton, FL 34205

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Lisa Johnson* REQUIRED

1/15/98

941-747-0667

CR2E037 (10/97)