02221999-90072-029-$61.25-$61.25

[redacted]

FILED
Feb 22, 1999 8:00 am
Secretary of State
02-22-1999 90072 029 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **745391**

1. Corporation Name

JUNIOR LEAGUE OF MANATEE COUNTY, INC..

273600 - 90058 - 23

Principal Place of Business	Mailing Address
1023 MANATEE AVENUE WEST SUITE 709 BRADENTON FL 34205 US	P.O. BOX 960 BRADENTON FL 34206 US

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 12/27/1978
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-1873975 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
VOGLER, EDWARD II 802 11TH ST. W BRADENTON FL 34205	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☑ DELETE	1.1 TITLE	President (Director)	☑ Change ☐ Addition
NAME	SEBERG, LAURA		1.2 NAME	Hope Stephenson	
STREET ADDRESS	1023 MANATEE AVE, W, 709		1.3 STREET ADDRESS	1023 Manatee Ave W, Suite 709	
CITY-ST-ZIP	BRADENTON FL 34205		1.4 CITY-ST-ZIP	Bradenton, FL 34205	
TITLE	VTD	☑ DELETE	2.1 TITLE	VTD (Director)	☑ Change ☐ Addition
NAME	JOHNSON, LISA		2.2 NAME	Kathleen Cucci	
STREET ADDRESS	1023 MANATEE AVE, W, 709		2.3 STREET ADDRESS	1023 Manatee Ave W, Suite 709	
CITY-ST-ZIP	BRADENTON FL 34205		2.4 CITY-ST-ZIP	Bradenton, FL 34205	
TITLE	VSD	☑ DELETE	3.1 TITLE	VSD (Director)	☑ Change ☐ Addition
NAME	THOMPSON, ROBIN		3.2 NAME	Turner Dottie	
STREET ADDRESS	1023 MANATEE AVE, W, 709		3.3 STREET ADDRESS	1023 Manatee Ave W #709	
CITY-ST-ZIP	BRADENTON FL 34205		3.4 CITY-ST-ZIP	Bradenton, FL 34205	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☑ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (11/98)

14. 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 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, with all other like empowered.

SIGNATURE: Kathleen A. Cucci SIGNATURE REQUIRED Kathleen A. Cucci VPF 1/8/99 941-747-0667
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #