2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Mar 03, 2007 **DOCUMENT# 749280** Secretary of State

Entity Name: MELBOURNE, FLORIDA, JAYCEES, INC.

Current Principal Place of Business: New Principal Place of Business:

2401 POST ROAD MELBOURNE, FL 32935

Current Mailing Address: New Mailing Address:

P.O. BOX 361151 6901 US HIGHWAY 192 MELBOURNE, FL 329361151 MELBOURNE, FL 32904

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

WAELTI, RICK S HITE, DANIEL L

6901 US HIGHWAY 192 7290 WÁELTI DR MELBOURNE, FL 32940 US US MELBOURNE, FL 32904

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.

SIGNATURE: DANIEL L HITE 03/03/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition WAELTI, RICK S HITE, KAREN E Name: Name: 7290 WAELTI DR Address: 6901 US HIGHWAY 192 Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32904 Title: Title: () Change (X) Addition () Delete Name: Name: PERTESIS, LEISA Address: Address: 351 TUSCANY WAY #101 City-St-Zip: City-St-Zip: MELBOURNE, FL 32940 Title: () Delete Title: () Change (X) Addition MILLER, JACQUELINE Name: Name: 4407 YORKSHIRE DR Address: Address: City-St-Zip: City-St-Zip: MELBOURNE, FL 32935 Title: () Delete Title: () Change (X) Addition Name: Name: LINKENHOKER, CINDY 1246 CYPRESS BEND CIR Address: Address: City-St-Zip: City-St-Zip: MELBOURNE, FL 32934 Title: () Delete Title: () Change (X) Addition RUSSO, SUZANNE Name: Name: 4407 YORKSHIRE DR Address: Address: City-St-Zip: City-St-Zip: MELBOURNE, FL 32935

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KAREN HITE Ρ 03/03/2007