2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#751990

Entity Name: PALM BAY AREA JAYCEES, INC.

FILED Apr 30, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1602 PORT MALABAR RD PALM BAY, FL 32905 **Current Mailing Address: New Mailing Address:** P.O. BOX 060264 PALM BAY, FL 32906 FEI Number: 59-2395405 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORDOVA, VIRGINIA 3580 BIG PÍNE ROAD MELBOURNE, FL 32934 US 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CORDOVA, VIRGINIA Name: Name: Address: 3580 BIG PINE ROAD Address: PALM BAY, FL 32905 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: PETTY, TAMMY Name: WISNIEUSKI, MARTHA Address: 883 BLANCA DRIVE NE Address: 1374 VAN BUREN AVE. SE City-St-Zip: PALM BAY, FL 32905 City-St-Zip: PALM BAY, FL 3290 Title: () Delete Title: () Change () Addition GORDON, MITCHELL Name: Name: 2731 RHAPSODY ST Address: Address: City-St-Zip: PALM BAY, FL 32905 City-St-Zip: Title: () Delete Title: () Change () Addition REDMOND, TOM Name: Name: 599 AWIN CIRCLE Address: Address: City-St-Zip: PALM BAY, FL 32909 City-St-Zip: Title: () Delete Title: () Change () Addition SMITH, RITA Name: Name: 4317 SHERWOOD BLVD. Address: Address: City-St-Zip: MELBOURNE, FL 32935 City-St-Zip: Title: () Delete Title: () Change () Addition BRADBERRY, LISA Name: Name: Address: 1116 WHITEHEAD ROAD S.W. Address: PALM BAY, FL 32908 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: VIRGINIA CORDOVA V 04/30/2002