## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 756501** 

FILED Apr 13, 2009 Secretary of State

Entity Name: THE JUNIOR SERVICE LEAGUE OF PANAMA CITY, INC.

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

911 CHERRY ST. P. O. BOX 743

PANAMA CITY, FL 324020743 US

Current Mailing Address: New Mailing Address:

P.O. BOX 743 P. O. BOX 743

PANAMA CITY, FL 324020743 US

FEI Number: 59-6152202 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:

ENNIS, TIFFANY WEST, MANDY

211 S. CLAIRE DRIVE 115 LÉGEND LAKES DRIVE

PANAMA CITY, FL 32401 US PANAMA CITY BEACH, FL 32408 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: MANDY WEST 04/13/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: P ( ) Delete Title: P (X) Change ( ) Addition

Name: MOODY, AMY Name: DAVIS, KARA Address: 3316 COUNTRY CLUB DRIVE Address: 141 BONAIRE DRIVE

City-St-Zip: LYNN HAVEN, FL 32444 City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: PE ( ) Delete Title: PE (X) Change ( ) Addition

Name: DAVIS, KARA Name: BOYLE, CHERI

Address: 1806 CONNECTICUT AVE
City-St-Zip: LYNN HAVEN, FL 32444

Address: 4009 MARY LOUISE DRIVE
City-St-Zip: PANAMA CITY, FL 32405

Title: TPT () Delete Title: TPT (X) Change () Addition

 Name:
 ENNIS, TIFFANY
 Name:
 WEST, MANDY

 Address:
 211 S. CLAIRE DRIVE
 Address:
 115 LEGEND LAKES DRIVE

City-St-Zip: PANAMA CITY, FL 32401 City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: AT ( ) Delete Title: AT (X) Change ( ) Addition

 Name:
 WEST, MANDY
 Name:
 PIKE, HEATHER

 Address:
 113 LEGEND LAKES DRIVE
 Address:
 2014 TUPELO COURT

 City-St-Zip:
 PANAMA CITY BEACH, FL 32408
 City-St-Zip:
 PANAMA CITY, FL 32405

I hereby certify that the information supplied with this filing does not qualify 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: MANDY WEST TPT 04/13/2009