

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759875

FILED  
Apr 08, 2009  
Secretary of State

Entity Name: VERO BEACH JAYCEES, INC.

**Current Principal Place of Business:**

6780 26TH ST.  
VERO BEACH, FL 32960

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1671  
VERO BEACH, FL 32961

**New Mailing Address:**

FEI Number: 59-6004565

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FINE, ANGELA  
110 14TH AVE  
VERO BEACH, FL 32962 US

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

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:**

Title: PRES ( ) Delete  
Name: WOODBY, CATHERINE  
Address: 3175 1ST LANE  
City-St-Zip: VERO BEACH, FL 32968

Title: SECR ( ) Delete  
Name: SHANLEY, IRENE  
Address: 6032 INDRIQ RD P-3  
City-St-Zip: FORT PIERCE, FL 34951

Title: TREA ( ) Delete  
Name: FINE, ANGELA  
Address: 110 14TH AVE  
City-St-Zip: VERO BEACH, FL 32962

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: BVP ( ) Change (X) Addition  
Name: SEWELL, DOYLE  
Address: 230 11TH CT  
City-St-Zip: VERO BEACH, FL 32962

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: ANGELA FINE

TREA

04/08/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date