

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006631

FILED
Jul 18, 2008
Secretary of State

Entity Name: JUNIOR AUXILLARY OF MADISON COUNTY, INC.

Current Principal Place of Business:

379 W BOSE ST
MADISON, FL 32341

New Principal Place of Business:

734 NE OREGANO AVE
PINETTA, FL 32350

Current Mailing Address:

P O BOX 15
MADISON, FL 32341

New Mailing Address:

FEI Number: 38-3658083 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BEGGS, HEATHER TREASUR
195 N WASHINGTON AVE
MADISON, FL 32340 US

Name and Address of New Registered Agent:

PIKE, SARAH TREASUR
734 NE OREGANO AVE
PINETTA, FL 32350 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: SARAH PIKE

07/18/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: CHERRY, JULIE
Address: 379 W BOSE ST
City-St-Zip: MADISON, FL 32340

Title: VP () Delete
Name: JOHNSON, ANNETTE
Address: 4773 WEST US 90
City-St-Zip: MADISON, FL 32340

Title: TREA () Delete
Name: BEGGS, HEATHER
Address: 195 N WASHINGTON AVE
City-St-Zip: MADISON, FL 32340

Title: DT () Delete
Name: DAVIS, KIM
Address: 2993 NE HWY 6
City-St-Zip: MADISON, FL 32340

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BUNTING, JANIS
Address: 282 BEVAN LOOP
City-St-Zip: MADISON, FL 32340

Title: VP (X) Change () Addition
Name: WASHINGTON, KARA
Address: 12353 NE COLIN KELLY HWY
City-St-Zip: PINETTA, FL 32350

Title: TREA (X) Change () Addition
Name: PIKE, SARAH
Address: 734 NE OREGANO AVE
City-St-Zip: PINETTA, FL 32350

Title: DT (X) Change () Addition
Name: BARNES, JANIE
Address: 235 NE DAHLIA TRAIL
City-St-Zip: PINETTA, FL 32350

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: SARAH PIKE

TREA

07/18/2008

Electronic Signature of Signing Officer or Director

Date