2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23052

FILED Aug 25, 2009 Secretary of State

Entity Name: JUNIOR COTILLION OF SOUTH JACKSONVILLE, INC.

Current Principal Place of Business:			New Principal Place of Business:				
O. BOX ACKSON	24134 IVILLE, FL 32241	US		TWORTH : VILLE, FL :		US	
urrent Mailing Address:			New Mailing Address:				
O. BOX ACKSON	24134 IVILLE, FL 32241	US					
accordan	ce with s. 607.193(2)(b), F.S., the corporation did not receiv	-	e.			atus Desired ()
ame and	l Address of Curre	nt Registered Agent:	Name and	Address o	of New F	Registered	l Agent:
006 ATĹA	DEVRY E ANTIC BLVD IVILLE, FL 32211	US					
		its this statement for the purpose	of changing i	ts registere	ea onice	or register	ed agent, or both
	e named entity subm e of Florida.	its this statement for the purpose	of changing i	ts registere	а опісе	or register	ed agent, or both
	e of Florida. RE:	· ·	of changing i	ts registere	а опісе	or register	ed agent, or both
the State	e of Florida. RE:	its this statement for the purpose gnature of Registered Agent	of changing i	ts registere	о опісе	or registere	ed agent, or both
the State	e of Florida. RE:	gnature of Registered Agent				Date	ed agent, or both
the State	e of Florida. RE: Electronic Sig	gnature of Registered Agent S:			ES TO C	Date	AND DIRECTO
the State GNATUI FFICER: le: ume: dress:	e of Florida. RE: Electronic Signature S AND DIRECTOR: VD () Delet LEONE, JEANINE 9902 WINDWATER C	gnature of Registered Agent S: e 32256 e	ADDITION Title: Name: Address:		ES TO C	Date DFFICERS	S AND DIRECTO
the State GNATUI FFICER: le: me: dress: y-St-Zip: le: me: dress:	e of Florida. RE: Electronic Signature S AND DIRECTOR: VD () Deletted LEONE, JEANINE 9902 WINDWATER CONTROLE, FL VD (X) Deletted OSSI, ROBYN 2852 EVERCHARM P	gnature of Registered Agent S: e T 32256 e L 32257 e	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:		ES TO C () Chan () Chan	Date DFFICERS nge () Additi	on

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: DEBBIE HARRISON TD 08/25/2009