2000 UNIFORM BUSINESS REPORT (UBR) FILED Jan 29, 2000 8:00 am **DOCUMENT # N40488 Secretary of State** 1. Entity Name JUNIOR LEAGUE OF INDIAN RIVER, INC. 01-29-2000 90110 025 ****61.25 Principal Place of Business Mailing Address P O BOX 3008 925 7TH AVE. VERO BEACH FL 32960 VERO BEACH FL 32964 2. Principal Place of Business 3. Mailing Address 877+ Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number VERO BEACH. 59-3042966 Not Applie Zip Country \$8.75 Additional 32960 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Kossway BECCA Street Address (P.O. Box Number is Not Acceptable) TOOMEY, STEPHANIE H 1033 PALMAR DE AYS DRIVE RIVER KIDGE 1370 VERO BEACH FL 32963 City VERO BEACH 8. 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. 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. П Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Change TITLE TITLE Delete ROSSWAY, REBECCA NAME COLLINS, EDIE NAME 1370 RIVER RIDGE STREET ADDRESS STREET ADDRESS 886 47TH AVENUE CITY-ST-ZIP CITY-ST-ZIP VERO BEACH, FL 32963 VERO BEACH FL 32966 Delete HAFNER, JOELEN D۷ TITLE TITLE NAME NAME ROSSWAY, REBECCA 345 ZIST AVENUE STREET ADDRESS STREET ADDRESS 1370 RIVER RIDGE CITY-ST-7IP VERO BEACH, FL 32962 CITY-ST-ZIP vero Beach FL 32963 TITLE Delete TITLE Change HENDRICKS, LUCY 280 RIVERWAY DRIVE NAME TOOMEY, STEPHANIE H NAME STREET ADDRESS STREET ADDRESS 1033 PALMAR DE AYS DR VERO BEACH, FL 32963 CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32963 TITLE Change TITLE Delete COTHERMAN CONNIE 465 3279 AVENUE S.W. NAME NAME RIGSBY, JUDY STREET ADDRESS STREET ADDRESS **2115 33RD AVENUE** CITY-ST-ZIP CITY-ST-7IP VERO BEACH, FL 32968 VERO BEACH FL 32960 ☐ Change TITLE TITLE 🙀 Delete GLAAB, SHERRI NAME NAME KNIGHT, JULIE 405 LIVE OAK DRIVE STREET ADDRESS STREET ADDRESS 516 LIVE OAK RD CITY-ST-7/P VERO BEACH FL 32963 CITY-ST-ZIP VEO BEACH FL 32963 ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: