

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000000390

1. Entity Name

JUNETEENTH, INC.



Principal Place of Business

7938 BENJAMIN DRIVE
LAKELAND FL 33810

Mailing Address

7938 BENJAMIN DRIVE
LAKELAND FL 33810

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

MOORE-BAILEY, DORIS
2050 SOMERVILLE DRIVE SOUTH
LAKELAND FL 33801

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME PD
STREET ADDRESS MOORE-BAILEY, DORIS
CITY-ST-ZIP 2050 SOMERVILLE DRIVE SOUTH
LAKELAND FL 33801 ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME T
STREET ADDRESS PORTER, BETTY S
CITY-ST-ZIP 1015 W 14TH STREET
LAKELAND FL ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME S
STREET ADDRESS SCALES, MADIE
CITY-ST-ZIP 202 W 9TH ST
LAKELAND FL 33805 ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME D
STREET ADDRESS LITTLE, SYLVESTER
CITY-ST-ZIP 1547 W 7TH ST
LAKELAND FL ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME D
STREET ADDRESS MOORE, JOHNNIE
CITY-ST-ZIP 1122 W 14TH STREET
LAKELAND FL 33810 ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Doris Moore Bailey* *Doris Moore Bailey* 7/10/2001 (863) 688-7698 4.25

FILED
Jul 24, 2001 8:00 am
Secretary of State

07-24-2001 90012 018 ****61.25

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DO NOT WRITE IN THIS SPACE

CR2E037 (5/01)