

# 2002 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

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

Name

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

City

FL

Zip Code

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

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

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

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

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

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

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

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

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

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

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

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 22 April '02 (863) 688-7648  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED  
Jul 09, 2002 8:00 am  
Secretary of State

07-09-2002 90019 015 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)