

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745391

Entity Name: JUNIOR LEAGUE OF MANATEE COUNTY, INC..**Current Principal Place of Business:**1001 THIRD AVENUE W
SUITE 380
BRADENTON, FL 34205**Current Mailing Address:**PO BOX 14117
BRADENTON, FL 34280 US**FEI Number:** 59-1873975**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**VITALE, BOBBI JAYNE
1001 THIRD AVE W
SUITE 380
BRADENTON, FL 34205 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:** BOBBI JAYNE VITALE

04/13/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name VITALE, BOBBI JAYNE
Address PO BOX 14117
City-State-Zip: BRADENTON FL 34280

Title TREASURER
Name JENSVOLD, JULIE
Address PO BOX 14117
City-State-Zip: BRADENTON FL 34280

Title COMMUNITY VP
Name FRINK, LEANN
Address PO BOX 14117
City-State-Zip: BRADENTON FL 34280

Title RECORDING SECRETARY
Name MCALLISTER, KARA
Address PO BOX 14117
City-State-Zip: BRADENTON FL 34280

Title VP
Name GERALDSON, LAUREN
Address PO BOX 14117
City-State-Zip: BRADENTON FL 34280

Title FINANCE VP
Name TAYLOR, LAUREN
Address PO BOX 14117
City-State-Zip: BRADENTON FL 34280

Title CORRESPONDING SECRETARY
Name TOMLINSON, SIERRA
Address PO BOX 14117
City-State-Zip: BRADENTON FL 34280

Title MEMBERSHIP VP
Name WENTZELL, BRITTANY
Address PO BOX 14117
City-State-Zip: BRADENTON FL 34280

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I hereby 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 all other like empowered.

SIGNATURE: BOBBI JAYNE VITALE

PRESIDENT

04/13/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	ASST. TREASURER
Name	TAYLOR, KATE
Address	PO BOX 14117
City-State-Zip:	BRADENTON FL 34280