5-19-97 B 7523 C FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

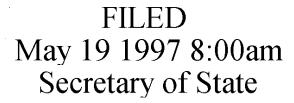
703982

(9)

GIRL SCOUTS OF GULFCOAST FLORIDA, INC.

Principal Place of Business	Principal	Place	of	Bus	iness
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Mailing Address





2909 OLYMPIC STREET 2909 OLYMPIC STREET SARASOTA FL 34231 SARASOTA FL 34231-8319		9		Date incorporated or Qualified	3a. Da	te of Last R	Report		
					05/01/1962		05/01/19		
Principal Place of Business 28. Mailing Address				4. FEI Number	!	A	oplied For		
21		26			59-0760212		No	ot Applicable	
Suite, Apt. #, etc. Sui		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired			5 Additional Required	
City & St	tate	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip 24	Country 25	Zip 29	Country 30	, `	8. This corporation has liability for i	ntangible] Yes [. 199.032,	
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Re	gistered A	igent		
			81	Name					
	AR, DOROTHY Olympic Street		82	Street Ad	ddress (P.O. Box Number is Not Acceptab	le)			
SARA	SOTA FL 34231		83						
			84	City		FL	85 Zip	Code	
11. Pursua	nt to the provisions of Sections 617.0	0502 and 617.1508, Florida Statu	tes, the abov	e-named o	orporation submits this statement for the p	uronea of	changing i	ts registered	
agent.	or registered agent, or both, in the St I am familiar with, and accept the ob	ate of Florida. Such change was ligations of, Section 617.0503, Fi	autnorized by Iorida Statute	/ the corpo s.	pration's board of directors. I hereby accep	ot the appo	as intment	registered	
SIGNATUR									
	Signature typed or printed name of registered			ent tignature re	equired when reinstating)	DATE			
12.	D OFFICERS	AND DIRECTORS	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFIC	ERS AND	Change	Addition	
NAME	GILLIAR, DOROTHY	·	1.2 NAME				Change	Addition	
STREET ADDRES	AAAA AARRIIABART BAAA)	1.3 STREET	ADDRESS					
CITY-S1-ZIP	SARASOTA FL		1,4 CITY-5						
TITLE	P	DELETE	2.1 TITLE	<u> </u>			Change	☐ Addition	
NAME	YOUNG, LYNDA		2.2 NAME						
STREET ADDRES	s 3005 SE 22ND PL		2.3 STREET	ADDRESS					
CITY-ST-ZIP	CAPE CORAL FL		2.4 CITY-	ST-ZIP					
TITLE	V	DELETE	3.1 TITLE		Vice President		☐ Change	XX Addition	
NAME	NORTON, ISABEL	•	3.2 NAME		DAWSON, TAMMY				
STREET ADDRES	S 1500 NORTH DRIVE SARASOTA FL		3.3 STREET	· I	13515 2nd Avenue				
CHTY-ST-ZIP TITLE	T SANASUIA FL	☐ DELETE	3.4. CITY-1		Bradenton, FL 34202		Change	Addition	
NAME	RONK, JENNY	_ ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4. 2 NAME		Director	•	Strange	Addition	
STREET ADDRES	A TALL ALLIA CHILD BIRGE OF	CLE	4.3 STREET	ADDRESS		•			
CITY - ST - ZIP	SARASOTA FL	- 	4.4 CITY-5				•		
TITLE	D	☐ DELETE	5.1 TITLE		West of the state		Change	Addition	
NAME	LURTZ, JANE		5.2 NAME						
STREET ADDRES			5.3 STREET	ADDRESS					
CITY - S1 - ZIP	PORT CHARLOTTE FL		5.4 CITY - \$	ST-ZIP	· .				
TITLE	D	DELETE	6.1 TITLE		Vice President		Change	Addition	
NAME	EZZELL, LINDA		6.2 NAME						
STREET ADDRES			6.3 STREET		•		-		
CITY - ST - ZIP	PUNTA GORDA FL		6.4 CITY - S	T-2#P					

14. I do hereby certify that the information supplied with this fifing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Bloc

SIGNATURE:

5-3-97