2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

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03-09-2004 90003 037 ****61.25

TAMPA, FLORIDA CHAPTER OF THE NATIONAL ASSOCIATION OF WOMEN IN CONSTRUCTION, INC.										
Principal Place of Business ONE NORTH DALE MABRY HWY SUITE 820 TAMPA, FL 33609 US		Mailing Address ONE NORTH DALE MABRY HWY SUITE 820 TAMPA, FL 33609 US			1 186711 14676		el bisti sisti Gi	5914 		
2. Principal Place of Business 2403 East 4th Ave.		3. Mailing Address 2403 East 4th		Ave.						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02172004	Chg-NP	CR2E03	37 (10/03)		
Tampa, Florida			Tampa, Florida			4. FEI Number 23-7061089			<u> </u>	pplied For ot Applicable
33605		ls.	33605	Count Hil			of Status Desired		\$8.75 Ad Fee Require	
6. Name and Address of Current Registered A			egistered Agent	 -	Mama	7. Name and	Address of New F	Registered .	Agent	
UPHAM, MARY A 11406 MIDFIELD WAY TAMPA, FL 33624			~· ~	· -	Name Street Address (P.O. Box Number is Not Acceptable)					
					City	<u> </u>		FL	Zip Cod	de
	named entity submits ions of registered age		the purpose of changing its	registered	office or reg	istered agent, or both	n, in the State of Fl		familiar with	, and accept
SIGNATURE.	Signature, typed or printed ru	eme of registered agent sr	nd title if applicable. (NOT	E: Registered /	Agent signature rec	quired when reinstating)		DATE		_
237/22 711	Filing Fee is \$6 Due by May 1, 2		9. Election Car			\$5.00 May Be Added to Fees			k payable rtment of S	
	Due by May 1,				n. 🔲	Added to Fees		rida Depa	rtment of S	itate
grapt for	Due by May 1,	2004 FFICERS AND DIRI		11. TITLE	n. P G1 ADORESS 45	Added to Fees ADDITIONS/CHA rivna, Fr 518 W. Id	NGES TO OFFICE ancene	rida Depai ERS AND DI L Ave	rtment of \$ IRECTORS II	itate
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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: