

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742504

FILED
Jan 21, 2005
Secretary of State

Entity Name: LA LECHE LEAGUE OF FLORIDA, INCORPORATED

Current Principal Place of Business:

4732 NW 6 CT
PLANTATION, FL 33317 US

New Principal Place of Business:

40 CATHERINE AVENUE
BABSON PARK, FL 33827 US

Current Mailing Address:

4732 NW 6 CT
PLANTATION, FL 33317 US

New Mailing Address:

40 CATHERINE AVENUE
BABSON PARK, FL 33827 US

FEI Number: 59-1817194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PELOSO, JOAN
4732 NW 6 CT
PLANTATION, FL 33317 US

Name and Address of New Registered Agent:

MORRIS, JENNIFER
40 CATHERINE AVENUE
BABSON PARK, FL 33827 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: JENNIFER MORRIS

01/21/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PELOSO, JOAN
Address: 4732 NW 6 CT
City-St-Zip: PLANTATION, FL 33317

Title: V () Delete
Name: STANFORD, ROBIN
Address: 3898 RUNNYMEDE RD
City-St-Zip: TALLAHASSEE, FL 32308

Title: V () Delete
Name: VEATCH, TAMMY
Address: 1614 WEAVER RD
City-St-Zip: LUTZ, FL 33559

Title: D () Delete
Name: MADDOX, JENNIFER
Address: 3225 PIONEER RD
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: RUDIN, ALICIA
Address: 3240 NW 27 TERR
City-St-Zip: GAINESVILLE, FL 32605

Title: S () Delete
Name: SIMPSON, ELLEN
Address: 2513 EDGEWOOD RD
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MORRIS, JENNIFER
Address: 40 CATHERINE AVENUE
City-St-Zip: BABSON PARK, FL 33827

Title: V (X) Change () Addition
Name: STANFORD, ROBIN
Address: 3898 RUNNYMEDE RD
City-St-Zip: TALLAHASSEE, FL 32309

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JENNIFER MORRIS

PD

01/21/2005

Electronic Signature of Signing Officer or Director

Date