

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 10 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N47352** (2)

1. Corporation Name

**NATIONAL ASSOCIATION OF WOMEN IN CONSTRUCTION OR
LANDO/WINTER PARK CHAPTER #73, INC.**



Principal Place of Business	Mailing Address
617 E. COLONIAL DR. ORLANDO FL 32803	617 E. COLONIAL DR. ORLANDO FL 32803

3. Date Incorporated or Qualified	02/14/1992
4. FEI Number	59-3118249
Applied For	☐
Not Applicable	☐

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

5. Certificate of Status Desired	☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	☐ Yes ☒ No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	☐ Yes ☐ No	

9. Name and Address of Current Registered Agent	
STARN, LILUAN E. 617 E. COLONIAL DRIVE ORLANDO FL 32803	

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☒ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☒ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☒ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

PD WALKER, PAT 2254 BLOSSOMWOOD DR OVIEDO FL	PD TANYA SIMS 1820 N. Goldenrod Rd. Orlando FL 32807
VPD LEWIS-BUCKLEY, STELLA 843 WOODEN BLVD ORLANDO FL	VPD Linda Moore-Buck 1060 maitland Cte Commons - 180 Maitland FL 32751-7172
SD SHAFFER, CINDI 3615 LAKEVIEW DR APOPKA FL	SD Terry Kocab 9808 International Dr. Orlando, FL 32819
TD PALMER, ARDEN 1400 W FAIRBANKS AVE., SUITE 102 WINTER PARK FL	SD Tamara Stenkamp 2470 mc Michael Rd. St. Cloud, FL 34771
	TD Kate Benson 674 wing Terrace Deltona FL 32725

14. 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 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 Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Kate Benson* 2/12/98 402-898-2902

CR2E037 (10/97)