2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 8:00 am
Secretary of State
04-13-2006 90308 025 ****61.25

DOCUMENT # N47352

1. Entity Name
GREATER ORLANDO CHAPTER #73 OF THE NATIONAL ASSOCIATION OF WOMEN IN CONSTRUCTION, INC.

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

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03302006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	P.O. Box 536983 Suite, Apt. #, etc.
City & State	City & State: ORLANDO, FL
Zip / Country	Zip: 32853 / Country: USA

4. FEI Number: 59-3118249 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

STARN, LILLIAN E.
617 E. COLONIAL DRIVE
ORLANDO, FL 32803

7. Name and Address of New Registered Agent

Name: JEAN L. COX
Street Address (P.O. Box Number is Not Acceptable): 2417 PERSHING OAKS PLACE
City: ORLANDO FL Zip Code: 32806

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Jean L. Cox 4/11/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P GIBSON-SONES, PATTI 8834 DEWSE CT GROVELAND, FL 34736	☒ Delete	P HALL, STEPHANIE 1053 COPENHAGEN WAY WINTER GARDEN, FL 34787	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T KRALL, BARBARA 1400 W FAIRBANKS AVE STE 102 WINTER PARK, FL 32789	☒ Delete	T COX, JEAN 2417 PERSHING OAKS PLACE ORLANDO, FL 32806	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V LANE, PAULA 349 EAST DRIVE MELBOURNE, FL 32904	☒ Delete	V WALKER, PATRICIA 2254 BLOSSOMWOOD DRIVE OVIEDO, FL 32765	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WHITE, STEPHANIE 8509 S. PARK CIR. ORLANDO, FL 32819	☒ Delete	S JACKSON, BETTINA 548 AVENIDA SEXTA #106 CLERMONT, FL 34714	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S RIMEL, BONNIE 2596 CURRYVILLE RD CHUTUOTES, FL 32766	☒ Delete	S DORMAN, SANDI 307 SWEETWATER CREEK DRIVE WEST LONGWOOD, FL 32779	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GOTSIS, CHERYL P.O. BOX 568492 ORLANDO, FL 32856	☒ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Jean L. Cox 4/11/06 407-897-8562
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #