## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47352

Apr 21, 2009 Secretary of State

Entity Name: GREATER ORLANDO CHAPTER #73 OF THE NATIONAL ASSOCIATION OF WOMEN IN

CONSTRUCTION, INC.

Current Principal Place of Business: New Principal Place of Business:

617 E. COLONIAL DR. ORLANDO, FL 32803

Current Mailing Address: New Mailing Address:

P.O. BOX 536983 ORLANDO, FL 32853

FEI Number: 59-3118249 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

YARNELL, ANNE M LEECE, JUDYKAY 502 GOODRIDGE LN 514 LAVON DRIVE

CASSELBERRY, FL 32730 US ALTAMONTE SPRINGS, FL 32701 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: JUDYKAY LEECE 04/21/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 JACKSON, BETTINA
 Name:
 SPIROPOULOS, CINDY

 Address:
 504 LAKE SUMNER DR
 Address:
 600 WILLOW POND LANE

Address: 504 LAKE SUMNER DR Address: 600 WILLOW POND LANE City-St-Zip: GROVELAND, FL 34736 City-St-Zip: OSTEEN, FL 32764

Title: T ( ) Delete Title: V (X) Change ( ) Addition
Name: YARNELL, ANNE Name: DAVIS, ELEANOR
Address: 502 GOODRIDGE LN Address: 4443 SEILS WAY

City-St-Zip: CASSELBERRY, FL 32730 City-St-Zip: ORLANDO, FL 32812

Title: V ( ) Delete Title: T (X) Change ( ) Addition
Name: ATKINS, APRIL Name: LEECE, JUDYKAY

Address: 338 W MORSE BLVD STE 150 Address: 514 LAVON DRIVE

City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: S () Delete Title: S (X) Change () Addition
Name: LEECE, JUDY KAY Name: MORELLO, LINDA

 Name:
 LEECE, JUDY KAY
 Name:
 MORELLO, LINDA

 Address:
 1920 BOOTHE CIR STE 110
 Address:
 12442 LAKE VALLEY DRIVE

 City-St-Zip:
 LONGWOOD, FL 32750
 City-St-Zip:
 CLERMONT, FL 34711

Title: S ( ) Delete Title: S (X) Change ( ) Addition

Name: WALKER, SARA Name: BUCHANAN, ROSE

Address: 865 BALLARD ST APT A Address: 4210 PLANTATION COVE DRIVE

City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: ORLANDO, FL 32810

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JUDYKAY LEECE T 04/21/2009