2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2003 8:00 am
Secretary of State
02-17-2003 90213 029 ****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

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

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	7. Name and Address of New Registered Agent
STARN, LILLIAN E. 617 E. COLONIAL DRIVE ORLANDO FL 32803	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

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	PD LOVEJOY-BLAYLOCK, RIKI 703 N LAKE JESSUP AVE ORLANDO FL 32856	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ELISE PALMIERI 617 E COLONIAL DR ORLANDO FL 32803	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD COX, JEAN 850 TRAFALGAR COURT, STE 100 MAITLAND FL 32751	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD VIRGINIA HINST 1895 CORPORATE SQUARE LONGWOOD FL 32750	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MAYBIN, ROSE 1820 N GOLDENROD RD ORLANDO FL 32807	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD TRACY MALONEY 3333 LAWRENCE ST ORLANDO FL 32805	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD STEVENS, BARBARA 6649 WESTWOOD BLVD ORLANDO FL 32821-6090	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD STEPHANIE WHITE 8509 S PARK CIRCLE ORLANDO FL 32819	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD GREY, JEAN 3701-3 50 LAKE ORL PKWY ORLANDO FL 32808	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CINDY SPIROPOULOS 5426 S BRACKEN CT WINTER PARK FL 32792	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD PALMIERI, ELISE 617 E COLONIAL DR ORLANDO FL 32803	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD LILLIAN STARN 617 E COLONIAL DR ORLANDO FL 32803	☒ Change ☐ Addition

CR2E037 (10/02)

12. 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 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: Elise Palmieri President 1/27/03 407 896 8021
SIGNATURE REQUIRED