

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51283

FILED
May 15, 2006
Secretary of State

Entity Name: GFWC TEMPLE TERRACE SERVICE LEAGUE, INC.

Current Principal Place of Business:

P.O. BOX 292793
TEMPLE TERRACE, FL 336876147 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 292793
TEMPLE TERRACE, FL 336876147 US

New Mailing Address:

FEI Number: 59-3158383 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PERLMAN, GEORGENE MRS.
6003 SOARING AVENUE
TEMPLE TERRACE, FL 33617 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PERLMAN, GEORGENE
Address: 6003 SOARING AVENUE
City-St-Zip: TEMPLE TERRACE, FL 33617 US

Title: V () Delete
Name: FERKING, JEN
Address: 7817 CAPWOOD
City-St-Zip: TEMPLE TERRACE, FL 33617 US

Title: S () Delete
Name: WEIGLE, EILEEN
Address: 6001 SOARING AVENUE
City-St-Zip: TEMPLE TERRACE, FL 33617 US

Title: T () Delete
Name: DONOHUE, CHERI MRS.
Address: 209 LINDA AVENUE
City-St-Zip: TEMPLE TERRACE, FL 33617 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: CALTAGIRONE, SHARON
Address: 9385 N 56TH ST
City-St-Zip: TEMPLE TERRACE, FL 33617 US

Title: P (X) Change () Addition
Name: FERKING, JEN
Address: 7817 CAPWOOD
City-St-Zip: TEMPLE TERRACE, FL 33617 US

Title: T (X) Change () Addition
Name: CAMPBELL, KRISTI
Address: 7110 LAUDER PL
City-St-Zip: TAMPA, FL 33617 US

Title: S (X) Change () Addition
Name: DONOHUE, CHERI MRS.
Address: 209 LINDA AVENUE
City-St-Zip: TEMPLE TERRACE, FL 33617 US

I hereby certify that the information supplied with this filing does not qualify for the 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: KRISTI CAMPBELL

T

05/15/2006

Electronic Signature of Signing Officer or Director

Date