

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47352

Entity Name: GREATER ORLANDO CHAPTER #73 OF THE NATIONAL ASSOCIATION OF WOMEN IN CONSTRUCTION, INC.**FILED**
Jan 31, 2023
Secretary of State
4769447285CC**Current Principal Place of Business:**CHARLES PERRY PARTNERS, INC.
200 E PALM VALLEY DR. SUITE 1040
OVIEDO, FL 32765**Current Mailing Address:**P.O. BOX 536983
ORLANDO, FL 32853 US**FEI Number: 59-3118249****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**WING, ALLYSON FOSS
GUIGNARD COMPANY
1904 BOOTHE CIRCLE
LONGWOOD, FL 32750 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: ALLYSON FOSS WING****01/31/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	ANDREASEN, KRISTIN
Address	CHARLES PERRY PARTNERS, INC. 200 E PALM VALLEY DR. SUITE 1040
City-State-Zip:	OVIEDO FL 32765

Title	PRESIDENT ELECT
Name	FARRINGTON, ADIS
Address	MILLS & NEBRASKA 2721 REGENTS ST.
City-State-Zip:	ORLANDO FL 32804

Title	VP
Name	DECAUL, NANCY
Address	PROSOURCE FINISHES INCORPORATED 5891 LAKEVILLE ROAD
City-State-Zip:	ORLANDO FL 32818

Title	RECORDING SECRETARY
Name	WALKER, KIM
Address	5435 74TH PL E.
City-State-Zip:	ELLENTON FL 34222

Title	CORRESPONDING SECRETARY
Name	SCOTT, ANN
Address	MILLS & NEBRASKA 2721 REGENT ST.
City-State-Zip:	ORLANDO FL 32804

Title	IMMEDIATE PAST PRESIDENT
Name	PHELAN, KELLY
Address	GUIGNARD COMPANY 1904 BOOTHE CIRCLE
City-State-Zip:	LONGWOOD FL 32750

Title	TREASURER
Name	WING, ALLYSON FOSS
Address	GUIGNARD COMPANY 1904 BOOTHE CIRCLE
City-State-Zip:	LONGWOOD FL 32750

I hereby 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 all other like empowered.

SIGNATURE: ALLYSON FOSS WING**TREASURER****01/31/2023**

Electronic Signature of Signing Officer/Director Detail

Date