

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700170

FILED
Jan 24, 2008
Secretary of State

Entity Name: GIRL SCOUT COUNCIL OF THE APALACHEE BEND INC.

Current Principal Place of Business:

250 PINEWOOD DRIVE
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

250 PINEWOOD DRIVE
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 59-0760209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, RASLEAN
250 PINEWOOD DRIVE
TALLAHASSEE, FL 32303 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: ROBERTS, KEITH
Address: 4217 BEN BOULEVARD
City-St-Zip: TALLAHASSEE, FL 32303

Title: S () Delete
Name: LUCE, STERLING
Address: 10873 LUNA POINT ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: T () Delete
Name: HINKZ, JULIE G
Address: 64 JOHN DAVID DR.
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: V () Delete
Name: OWENS, DANIELLE
Address: 1718 FERNDAL PLACE
City-St-Zip: TALLAHASSEE, FL 32301

Title: V () Delete
Name: SPARKMAN, ERNIE
Address: 108 ELIZABETH LANE
City-St-Zip: PERRY, FL 32348

Title: V () Delete
Name: GEIL, PEGGY
Address: 2714 RUTGERS DRIVE
City-St-Zip: PANAMA CITY, FL 32405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GEIL, PEGGY
Address: 2714 RUTGERS DR
City-St-Zip: PANAMA CITY, FL 32405

Title: S (X) Change () Addition
Name: HARRELL, ROBIN
Address: 5135 GUM SWAMP LN
City-St-Zip: TALLAHASSEE, FL 32304

Title: T (X) Change () Addition
Name: LUCE, STERLING
Address: 10873 LUNA POINT RD
City-St-Zip: TALLAHASSEE, FL 32312

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: TARRANT, CATHERINE
Address: 4820 S LAKEWOOD DR
City-St-Zip: PANAMA CITY, FL 32404

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: RASLEAN M. ALLEN, MSM

MRS

01/24/2008

Electronic Signature of Signing Officer or Director

Date