2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003
Secretary of State

DOCUMENT# 701024

Entity Name: GIRL SCOUTS OF GATEWAY COUNCIL, INC.

Current Principal Place of Business:

1000 SHEARER STREET
JACKSONVILLE, FL 322056055

New Principal Place of Business:

Current Mailing Address:

1000 SHEARER STREET
JACKSONVILLE, FL 322056055

New Mailing Address:

FEI Number: 59-0637857 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TYSVER, SANDRA B
1000 SHEARER ST
JACKSONVILLE, FL 32205 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:	PD	( ) Delete
Name:	LIPSKY, JAN	
Address:	3813 TREE LAKE DR	
City-St-Zip:	JACKSONVILLE, FL 32257	
Title:	VD	( ) Delete
Name:	MURROW, LINDA	
Address:	45 EAGLE COVE COURT	
City-St-Zip:	FERNANDINA BEACH`, FL 32034	
Title:	VD	( ) Delete
Name:	HAUSMAN, B J	
Address:	639 WYNDHAM CT	
City-St-Zip:	ORANGE PARK, FL 32073	
Title:	SD	( ) Delete
Name:	GORDON, BETH	
Address:	4824 APACHE AVE.	
City-St-Zip:	JACKSONVILLE, FL 32210	
Title:	TD	( ) Delete
Name:	NOWLAN, MICHAEL	
Address:	113 BOUGANVILLA DR	
City-St-Zip:	PONTE VEDRA BEACH, FL 32082	
Title:	VD	( ) Delete
Name:	RICHARDSON, JAMES	
Address:	2054 RIVERSIDE AVENUE, #6201	
City-St-Zip:	JACKSONVILLE, FL 32204	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAN LIPSKY PD 03/24/2003

Electronic Signature of Signing Officer or Director — Date