


FILE NOW: FILING FEE IS \$61.25

FILED
May 20 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 710456 (5)
 1. Corporation Name
PALM GLADES GIRL SCOUT COUNCIL, INC.



Principal Place of Business 2728 LAKE WORTH ROAD LAKE WORTH FL 33461	Mailing Address 2728 LAKE WORTH ROAD LAKE WORTH FL 33461-4124
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 03/01/1966	3a. Date of Last Report 02/06/1996
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-0624403	Applied For Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
Zip 24	Country 25	Zip 29	Country 30
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent FULLER, ELISA L 1900 PHILLIPS PT W 777 S FLAGLER DR WEST PALM BEACH FL 33401-3198		10. Name and Address of New Registered Agent 81 Name KIM PRINE 82 Street Address (P.O. Box Number is Not Acceptable) 1900 PHILLIPS PT W 83 777 S. FLAGLER DR. 84 City West Palm Beach FL 85 Zip Code 33401-3198	
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Kim A. Prine* DATE **May 12, 1997**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOANE, REBECCA A.	1.2 NAME	
STREET ADDRESS	11610 LANDING PL	1.3 STREET ADDRESS	
CITY-ST-ZIP	N PALM BEACH FL	1.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHESTER, DON	2.2 NAME	
STREET ADDRESS	129 SANTA LUCIA DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	2.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROSTOCK, EILEEN M.	3.2 NAME	
STREET ADDRESS	19523 TRAILS END	3.3 STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL	3.4 CITY-ST-ZIP	
TITLE	SD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBINSON, TERRI	4.2 NAME	POMELA E. ADAMS
STREET ADDRESS	8120 TWIN LAKE DR	4.3 STREET ADDRESS	3111 N PALM CIR
CITY-ST-ZIP	BOCA RATON FL	4.4 CITY-ST-ZIP	N. PALM BEACH FL 33408
TITLE	VD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GLOWICKI, CAROL	5.2 NAME	
STREET ADDRESS	2248-D WHITE PINE CIRCLE	5.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	5.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TURDO, LISA	6.2 NAME	
STREET ADDRESS	8158 ANDOVER CT	6.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE CLARK SHRS FL	6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 registered trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE: *Rebecca A. Doane* DATE **5-7-97** DAYTIME PHONE # **659-3000**

CR2E037 (9/96)