

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 15, 2004
Secretary of State**

DOCUMENT# 713009

Entity Name: GIRLS INCORPORATED OF WINTER HAVEN

Current Principal Place of Business:

2400 HAVENDALE BLVD.
WINTER HAVEN, FL 33881 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 7285
WINTER HAVEN, FL 338837285 US

New Mailing Address:

FEI Number: 59-1158810 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPILLANE, PEGGY
5 PEACHTREE LANE
WINTER HAVEN, FL 33884 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: MARTIN, VIRGINIA
Address: 525 POPE AVE
City-St-Zip: WINTER HAVEN, FL 33881

Title: TD () Delete
Name: CHRISMAN, STEVE
Address: 525 POPE AVE
City-St-Zip: WINTER HAVEN, FL 33881

Title: VD () Delete
Name: JOHNSON, THELMA
Address: 525 POPE AVENUE
City-St-Zip: WINTER HAVEN, FL 33881

Title: SD () Delete
Name: SPRINGER, LISA
Address: 210 SECURITY SQ
City-St-Zip: WINTER HAVEN, FL 33880

Title: D () Delete
Name: BECKEAT, CHERYL
Address: 631 E CENTRAL AVE
City-St-Zip: WINTER HAVEN, FL 33880

Title: D () Delete
Name: BURKE, MARTHA
Address: 3601 OLD NEW FOOT RD
City-St-Zip: WINTER HAVEN, FL 33881

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: CRISMAN, STEVE
Address: 525 POPE AVE
City-St-Zip: WINTER HAVEN, FL 33881

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

Title: SD (X) Change () Addition
Name: EZELL, PAT
Address: 503 HAMILTON SHORE COURT
City-St-Zip: WINTER HAVEN, FL 33881 US

Title: D (X) Change () Addition
Name: BECKERT, CHERYL
Address: 631 E CENTRAL AVE
City-St-Zip: WINTER HAVEN, FL 33880

Title: D (X) Change () Addition
Name: SCHULZ, HELENE
Address: 2920 EAST LAKE HARTRIDGE DRIVE
City-St-Zip: WINTER HAVEN, FL 33881

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: PEGGY SPILLANE

ED

03/15/2004

Electronic Signature of Signing Officer or Director

_____ Date