

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713009

FILED
Apr 17, 2012
Secretary of State

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:

THRELKEL, MARGARET
234 TOWHEE ROAD
WINTER HAVEN, FL 33881 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
Name: STAVRES, T. MICHAEL
Address: 451 THIRD STREET NW
City-St-Zip: WINTER HAVEN, FL 33881 US

Title: VD
Name: LONG, KIM
Address: 1400 BROADWAY BLVD.
City-St-Zip: POLK CITY, FL 33868 US

Title: TD
Name: BOYETTE, JON
Address: 1213 GREY FOX HOLLOW ROAD
City-St-Zip: WINTER HAVEN, FL 33880 US

Title: SD
Name: GEORGE, MARIANNE
Address: 999 AVENUE H NE
City-St-Zip: WINTER HAVEN, FL 33881 US

Title: D
Name: HULVERSON, KIMBERLY
Address: 250 MAGNOLIA AVENUE, SUITE 100
City-St-Zip: WINTER HAVEN, FL 33880 US

Title: D
Name: BRUCE, CINDY
Address: 136 PARK LANE
City-St-Zip: WINTER HAVEN, FL 33884 US

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: MARGARET L THRELKEL

ED

04/17/2012

Electronic Signature of Signing Officer or Director

_____ Date