

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Nov 05, 2008**  
**Secretary of State**

DOCUMENT# 714676

**Entity Name:** GIRL SCOUTS OF CITRUS COUNCIL, INC.**Current Principal Place of Business:**341 N. MILLS AVE.  
ORLANDO, FL 32803 US**New Principal Place of Business:****Current Mailing Address:**341 N. MILLS AVE.  
ORLANDO, FL 32803 US**New Mailing Address:****FEI Number:** 59-0696293**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**OWEN, KATHRYN INT CEO  
341 N. MILLS AVE.  
ORLANDO, FL 32803 US**Name and Address of New Registered Agent:**LENNOX, PAMELA CEO  
341 N. MILLS AVE.  
ORLANDO, FL 32803 US

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: PAMELA LENNOX

11/05/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** PD ( ) Delete  
**Name:** PARKER, JESSICA  
**Address:** 341 N MILLS AVE  
**City-St-Zip:** ORLANDO, FL 32803**Title:** VD ( ) Delete  
**Name:** PAPALINI, DARLENE  
**Address:** 341 N MILLS AVE  
**City-St-Zip:** ORLANDO, FL 32803**Title:** COO ( ) Delete  
**Name:** OWEN, KATHRYN  
**Address:** 341 N MILLS AVE  
**City-St-Zip:** ORLANDO, FL 32803**Title:** VD ( ) Delete  
**Name:** BINA, JIM  
**Address:** 341 N MILLS AVE  
**City-St-Zip:** ORLANDO, FL 32803**Title:** SD ( ) Delete  
**Name:** FAUSER, JENNIFER  
**Address:** 341 N MILLS AVE  
**City-St-Zip:** ORLANDO, FL 32803**Title:** TD ( ) Delete  
**Name:** BAGBY, NORA  
**Address:** 341 N MILLS AVE  
**City-St-Zip:** ORLANDO, FL 32803**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** CEO (X) Change ( ) Addition  
**Name:** LENNOX, PAMELA  
**Address:** 341 N MILLS AVE  
**City-St-Zip:** ORLANDO, FL 32803**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 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: PAMELA LENNOX

CEO

11/05/2008

Electronic Signature of Signing Officer or Director

Date