

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720249

FILED
Apr 30, 2005
Secretary of State

Entity Name: GIRLS INCORPORATED OF LAKELAND, INC.

Current Principal Place of Business:

1220 W. HIGHLAND ST.
P.O. BOX 1975
LAKELAND, FL 338021975

New Principal Place of Business:

1220 W. HIGHLAND ST.
LAKELAND, FL 33815

Current Mailing Address:

P. O. BOX 1975
LAKELAND, FL 338021975

New Mailing Address:

FEI Number: 23-7101551 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HARRIS-FIELDS, KAY
1015 WEST 13TH STREET
LAKELAND, FL 33805 US

Name and Address of New Registered Agent:

FIELDS, KAY
1015 WEST 13TH STREET
LAKELAND, FL 33805 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: KAY FIELDS

04/30/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ADAMS, MICHAEL
Address: 4335 SHADOW WOOD WAY
City-St-Zip: WINTER HAVEN, FL 33880

Title: TD () Delete
Name: GOLENO, TERRI
Address: 1921 DEL CREST PLACE
City-St-Zip: LAKELAND, FL 33803

Title: VD () Delete
Name: AIRTH, ADAM
Address: 2414 ROLSYN LANE
City-St-Zip: LAKELAND, FL 33813

Title: SD () Delete
Name: TRUSSELL, TIFFANY
Address: 173 WHITE CLIFF BLVD
City-St-Zip: AUBURNDAL, FL 33823

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: AIRTH, ADAM
Address: 2414 ROSLYN LANE
City-St-Zip: LAKELAND, 33

Title: TD (X) Change () Addition
Name: GIBSON, SANDRA
Address: 2454 4TH STREET
City-St-Zip: MULBERRY, FL 33860

Title: VD (X) Change () Addition
Name: TRUSSELL, TIFFANY
Address: 173 WHITE CLIFF BLVD
City-St-Zip: AUBURNDAL, FL 33823

Title: SD (X) Change () Addition
Name: JOHNSON, JOANN
Address: 6229 THOUSAND OAKS DRIVE
City-St-Zip: LAKELAND, FL 33813

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: ADAM AIIRTH

PD

04/30/2005

Electronic Signature of Signing Officer or Director

Date