## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#720249**

**FILED** May 05, 2007 Secretary of State

Entity Name: GIRLS INCORPORATED OF LAKELAND, INC.

Current Principal Place of Business:	New Principal Place of Business:
Outlett i interput i face of Business.	New I interput I face of Business.

1220 W. HIGHLAND ST. LAKELAND, FL 33815

**Current Mailing Address: New Mailing Address:** 

P. O. BOX 1975 LAKELAND, FL 338021975

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

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

**OFFICERS AND DIRECTORS:** 

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete AIRTH, ADAM JORDAN, JUAQUIN Name: Name: Address: 5407 VINTAGE VIEW PASS

2414 ROSLYN LANE Address: City-St-Zip: LAKELAND, 33 City-St-Zip: LAKELAND, FL 33812

Title: Title: ( ) Delete () Change () Addition Name: GIBSON, SANDRA Name:

Address: 2454 4TH STREET Address: City-St-Zip: MULBERRY, FL 33860 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

STANTON, TIFFANY Name: JOHNSON, JOANN Name:

3308 CLEVELAND HEIGHTS BLVD 6229 THOUSAND OAKS DRIVE Address: Address: City-St-Zip: LAKELAND, FL 33803 City-St-Zip: LAKELAND, FL 33813

Title: SD ( ) Delete Title: SD (X) Change ( ) Addition Name: JOHNSON, JOANN Name: SIMPKINS, LYNNE

6229 THOUSAND OAKS DRIVE 2917 MARTHA AVENUE Address: Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip: LAKELAND, FL 33805

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: SANDRA GIBSON TD 05/05/2007