FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT Secretary of DIVISION OF CORI				ONS	Secretary of State	
POCUN 1. Corporation	MENT # 738302	2 (9)		-		
GFWC	BRANDON SERVICE LEAGU	JE, INC.				
Principal Place	e of Business	Mailing Address				
121 ASHBROOK DR P O BOX 140					3. Date Incorporated or Qualified	ı
PO BOX 140 BRANDON FL 33509-7140		PQ-BOX-140* B T RANDON FL 33509-0140			03/08/1977	
		UŠ			4. FEI Number Applied For S9-1729630 Not Applicable	e
	ace of Business	2a. Mailing Address			5. Certificate of Status Desired \$8.75 Additional	_
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			Fee Required 6. Election Campaign Financing \$5.00 May Be	
22		27			Trust Fund Contribution Added to Fees	
City & State	•	City & State			7. Is this nonprofit corporation a homeowners association?	
Zip	Zip Country Zip C			·	8. This corporation owes or has paid the current year Intangible	
24	26	29 3	0		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New Registered Agent	_
ELAM, P.	AT		82	<u> </u>	at Address (P.O. Box Number is Not Acceptable)	
121 ASH	121 ASHBROOK DR			<u>[</u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_
BRANDO	ON FL 33511		83	<u> </u>		
			84	City	FL 85 Zip Code	
11. Pursuant t	to the provisions of Sections 617.0502	and 617.1508, Florida Statutes of Florida, Such change was aut	, the above	e-named v the cor	od corporation submits this statement for the purpose of changing its registered propration's board of directors. I hereby accept the appointment as registered	ī
1	m familiar with, and accept the obliga	tions of, Section 617.0503, Florid	da Statute	S.	prporation's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered agon	nt and title if applicable. (NOTE: F	tegistered Ag	eni signatura	ura required when reinstating) DATE	-
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	_
TITLE NAME	PD Mackinnon, ardie	₹2] DETEIE	1.1 TITLE 1.2 NAME		PD XI Change LI Addition CROONE, RITA	" ;
STREET ADDRESS	705 CENTERBROOK		1.3 STREET ADDRESS			
CITY-ST-ZIP	BRANDON FL		1.4 CITY-ST-ZIP		BRANDON FT. 33510-3536	
NAME	T Elam, pat	DELETE			WEAVER, T. J. Change X Additio	n.
STREET ADDRESS	121 ASHBROOK DR				1130 BELLADONNA DR. BRANDON FL 33510	
CITY-ST-ZIP	BRANDON FL		2.4 CITY-	ST-ZIP	Andrew Contractor again was a second	
TITLE NAME	PD Be rtram, Margaret	DELETE	3.1 TITLE 3.2 NAME		T. Change Addition	n
STREET ADDRESS	2020 W BRANDON BLVD		3.3 STREET ADDRESS		SCHWABE, BARBARA 2927 LITTLE ROAD	
CITY-ST-ZIP	BRANDON FL		3.4. CITY-ST-ZIP		VALRICO, FL 33594	
TITLE	VP	DELETE	4.1 TITLE 4.2 NAME		Change Additio	n
NAME STREET ADDRESS	PROSSER, JILL 1809 SIDNEY RD		t .	T ADDRESS		1
CITY-ST-ZIP	VALRICO FL		4.4 CITY-S			
TITLE	T	★ DELETÉ	5.1 TITLE		Change Additio	n
NAME STREET ADDRESS	HAMPTON, HILDA 117 GORNTO LAKE RD		5.2 NAME 5.3 STREET ADDRESS			
CITY-ST-ZIP	BRANDON FL		5.4 CITY-ST-ZIP			
TITLE	RS	DELETE	6.1 TITLE		☐ Change ☐ Additio	n
NAME CTOCCT ADDOLCC	MAXWELL, THERESA 302 OAK AVE		6.2 NAME	T ADDRESS		
STREET ADDRESS	SUE OAN AVE		0.3 STREET	נכשחטעא י	¹	

BRANDON FL 6.4 CITY - ST - ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, oppn an attachment with an address.

FILED

Jun 18 1998 8:00am