

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000000337

**FILED**  
**Mar 28, 2011**  
**Secretary of State**

**Entity Name:** KREWE OF LES BELLES FEMMES, INC.

**Current Principal Place of Business:**

2715 W. LEMON STREET  
TAMPA, FL 33609

**New Principal Place of Business:**

**Current Mailing Address:**

2715 W. LEMON STREET  
TAMPA, FL 33609

**New Mailing Address:**

**FEI Number:** 57-1148352

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ARENA, ANTHONY  
1005 N. MARION STREET  
TAMPA, FL 33602 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: P  
Name: FOLSOM, LEONARA  
Address: 2715 W LEMON ST  
City-St-Zip: TAMPA, FL 33609

Title: VP  
Name: ARENA, ELLEN  
Address: 1005 N. MARION STREET  
City-St-Zip: TAMPA, FL 33602

Title: T  
Name: WHALEY, JAMIE  
Address: 2605 W PROSPECT ROAD  
City-St-Zip: TAMPA, FL 33629

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: JAMIE WHALEY

T

03/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date