

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001239

FILED
May 01, 2006
Secretary of State

Entity Name: GFWC VALRICO SERVICE LEAGUE, INC.

Current Principal Place of Business:

2605 HERNDON STREET
VALRICO, FL 33594

New Principal Place of Business:

Current Mailing Address:

2605 HERNDON STREET
VALRICO, FL 33594

New Mailing Address:

FEI Number: 65-0301407 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

BORAIKO, KAREN J
2605 HERNDON STREET
VALRICO, FL 33594 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 () Delete
Name: ENRIGHT, DOTTIE
Address: 3816 TURKEY OAK DRIVE
City-St-Zip: VALRICO, FL 33594

Title: VP () Delete
Name: DWIGHT, ANDREA
Address: 3813 TURKEY OAK DRIVE
City-St-Zip: VALRICO, FL 33594

Title: VP () Delete
Name: BORAIKO, KAREN J
Address: 2605 HERNDON ST
City-St-Zip: VALRICO, FL 33594

Title: VP () Delete
Name: VOGELGESANG, WILLIE
Address: 3913 TURKEY OAK DRIVE
City-St-Zip: VALRICO, FL 33594

Title: S () Delete
Name: MURRI, CATHY
Address: 3902 HIDDEN SPRING PLACE
City-St-Zip: VALRICO, FL 33594

Title: T () Delete
Name: LEWIS, BONNIE
Address: 2406 BUCKHORN RUN DRIVE
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: BORAIKO, KAREN J
Address: 2605 HERNDON ST
City-St-Zip: VALRICO, FL 33594

Title: VP (X) Change () Addition
Name: BENNETT, KAREN
Address: 15937 SORAWATER DR
City-St-Zip: LITHIA, FL 33547

Title: VP (X) Change () Addition
Name: CARTER, KAREN
Address: 2103 COLEWOOD LANE
City-St-Zip: DOVER, FL 33594

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 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: KAREN J BORAIKO

VP

05/01/2006

Electronic Signature of Signing Officer or Director

Date