

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011597

FILED  
Feb 17, 2011  
Secretary of State

**Entity Name:** AMERICAN ASSOCIATION OF UNIVERSITY WOMEN, DAYTONA BEACH BRANCH INC.

**Current Principal Place of Business:**

5417 CANNA COURT  
PORT ORANGE, FL 32128

**New Principal Place of Business:**

C/O 55 OCEAN WAY DRIVE  
PONCE INLET, FL 32127

**Current Mailing Address:**

5417 CANNA COURT  
PORT ORANGE, FL 32128

**New Mailing Address:**

C/O 55 OCEAN WAY DRIVE  
PONCE INLET, FL 32127

**FEI Number:** 59-6150980

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

RHODES, JUNE E  
70 BIG BUCK TRAIL  
ORMOND BEACH, FL 32174 US

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

KRASKA, PAMELA A TRES  
55 OCEAN WAY DRIVE  
PONCE INLET, FL 32127 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: PAMELA KRASKA

02/17/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MCDERMOTT, EILEEN  
Address: 2736 AUTUMN LEAVES DRIVE  
City-St-Zip: PORT ORANGE, FL 32128

Title: V  
Name: MARIETTA, DONNA  
Address: 95 BEACH STREET  
City-St-Zip: PONCE INLET, FL 32127

Title: T  
Name: KRASKA, PAMELA  
Address: 55 OCEAN WAY DRIVE  
City-St-Zip: PONCE INLET, FL 32127

Title: S  
Name: AXELSEN, BRENDA  
Address: 106 BONITA PLACE  
City-St-Zip: ORMOND BEACH, FL 32174

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: PAMELA KRASKA

TREA

02/17/2011

Electronic Signature of Signing Officer or Director

Date