## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 14, 2008 8:00 am Secretary of State

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DOCUMENT # N0500001352  1. Entity Name POLK COUNTY, FL. CHAPTER OF THE EXECUTIVE WOMEN'S ASSOCIATION, INC.							<b>u</b> 11 v			017 ****	70.00	
Principal Place of Business 6507 BRISTOL OAKS DR LAKELAND, FL 33811  Mailing Address 6507 BRISTOL OAKS DR LAKELAND, FL 33811  LAKELAND, FL 33811								Têrên Rijir êsjir ter	ı Basık asılı atta	I KRTO (KIEL OKLIE L	1209) Bi 400)	
2. Principal Place of Business - No P.O. Box # 3. Mailing Address 274 HeRA					rand	lo Ad	•					
Suite, Apt. #, etc. Suite, Apt. #, etc. WINTER HAVEN, FL. WINTER H					#, etc.			01112008	Chg-NP	CR2E	037 (12/06)	
City & State	θ		City	/ & State				4. FEI Numbe 51-0549	958		<del> </del>	pplied For ot Applicable
<sup>zig</sup> 3388	4-1026	POLK	33	884-1026	$\mathcal{P}$	untry bんと		5. Certificate	of Status Desire	od 🖭	\$8.75 Ad Fee Requin	
	8. Name	and Address of Current	Registered	d Agent				7. Name and	Address of Ne	w Registered	d Agent	
SCHMIDT, CAROLYN 1000 AVE. G. N.E. WINTER HAVEN, FL 33881						Name Street Address (P.O. 100k Number is Not Acceptable)						
						City			<del> </del>	F	L Zip Cod	de
		y submits this statement for	or the purpo	ose of changing its	register	red office or	register	ed agent, or bot	h, in the State o	f Florida. I a	m familiar with	, and accept
the obligati	ions of regist	tered agent.	•									
CALADIN Sohmed										1/20		
SIGNATURE Signature, typed or project name of requisitered agent and tible if applicable. (NOTE: Registered Agent signature required									///			
SIGNATURE.	Signature, typed	d or printed name of registered agent	t and title if appli	icable. (NOT	E: Register	ed Agent signatu	are required	when reinstating)		DATE	100	
SIGNATUHE.	Filing Fe	or prived name of registered agen	at and title if appli	9. Election Car Trust Fund (	mpaign I	Financing	ure required	\$5.00 May B	e		ck payable	
	Filing Fe	ee is \$61.25 May 1, 2008	:	9. Election Car	mpaign I	Financing tion.		\$5.00 May B Added to Fees		Florida Dep	artment of S	State
10.	Filing Fe	e is \$61.25	:	9. Election Car	mpaign I Contribu	Financing tion.		\$5.00 May B Added to Fees		Florida Dep	artment of S	State
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10. ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DP LINEBER 1606 TAL LAKELAN VP WINTERS	OFFICERS AND DI GER, JANIE LL PINE TRAIL ND, FL 338100186	:	9. Election Car Trust Fund (	mpaign I Contribu  11.  THE NAA STR CIT TILL NAA	Financing tion.  LE  ME  ME  ME  TATORESS  Y-ST-ZIP  LE  ME	PRE LIN 2714 VICE SHY	\$5.00 May B Added to Fees ADDITIONS/CHI SICENT. DA EI HERNA THALLE PRESIDE TRON C.	anges to off ndo Rd at the	Florida Dep FICERS AND I	DIRECTORS I Change	State N 10 Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED HARRE OF BIGHTING OFFICER OR DIRECTOR

1/11/08

863-293-7229

Daytime Phone #