

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006193

FILED
May 01, 2009
Secretary of State

Entity Name: ST. PETERSBURG CHAPTER OF TOP LADIES OF DISTINCTION, INC.

Current Principal Place of Business:

1753 66TH AVE SOUTH
ST. PETERSBURG, FL 33712

New Principal Place of Business:

Current Mailing Address:

1753 66TH AVE SOUTH
ST. PETERSBURG, FL 33712

New Mailing Address:

P O BOX 531122
ST. PETERSBURG, FL 33747

FEI Number: 11-3813545 **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:

JOHNSON, KATHIE
1038 25TH STREET NORTH
ST. PETERSBURG, FL 33713 US

Name and Address of New Registered Agent:

NESBITT, NAOMI
2810 KIPPS COLONY DR.
ST. PETERSBURG, FL 33707 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: NAOMI L. NESBITT

05/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WESLEY, DELORES
Address: 1753 66TH AVE SOUTH
City-St-Zip: ST. PETERSBURG, FL 33712

Title: T () Delete
Name: BOULDRICK, RAYETTE
Address: 5211 KARLSBURY PLACE
City-St-Zip: PALM HARBOUR, FL 34685

Title: VP (X) Delete
Name: MITCHELL, LORETTA
Address: 1219 ELDRIDGE STREET
City-St-Zip: CLEARWATER, FL 33755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: DELORES WESLEY

PD

05/01/2009

Electronic Signature of Signing Officer or Director

Date