

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002338

FILED
Jan 08, 2009
Secretary of State

Entity Name: THE GIRLZ OF HARBORSPRINGS, INC.

Current Principal Place of Business:

631 N. MAYO STREET
CRYSTAL BEACH, FL 34681

New Principal Place of Business:

Current Mailing Address:

PO BOX 1177
CRYSTAL BEACH, FL 34681

New Mailing Address:

FEI Number: 26-2355928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
1111 LINCOLN ROAD
SUITE 400
MIAMI BEACH, FL 33139 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: SHERMAN, DEBORAH
Address: POST OFFICE BOX 1177
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: S () Delete
Name: POPE, TERESA
Address: 3373 EAST LAKE SHORE LANE
City-St-Zip: CLEARWATER, FL 33761

Title: T () Delete
Name: FOREIT, KAREN
Address: POST OFFICE BOX 373
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: WATKINS, DENISE
Address: POST OFFICE BOX 863
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: D () Change (X) Addition
Name: LATVALA, SUSAN
Address: 109 PHILLIPS WAY
City-St-Zip: PALM HARBOR, FL 34683

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: DEBORAH K SHERMAN

PRES

01/08/2009

Electronic Signature of Signing Officer or Director

_____ Date