

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 27, 2012
Secretary of State

DOCUMENT# N10000000137

Entity Name: MARINE FAMILIES OF POLK COUNTY, CORP.**Current Principal Place of Business:**2076 MEADOW OAK CIRCLE
POLK CITY, FL 33868**New Principal Place of Business:****Current Mailing Address:**2076 MEADOW OAK CIRCLE
POLK CITY, FL 33868**New Mailing Address:**P.O. BOX 2032
BARTOW, FL 338312032 US**FEI Number:** 27-1678189**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**BETTERLY, JOHNNIE
2076 MEADOW OAK CIRCLE
POLK CITY, FL 33868 US**Name and Address of New Registered Agent:**AMERSON, BETTY
455 RESTWOOD AVE.
BARTOW, FL 33830 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: BETTY W. AMERSON

07/27/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: BETTERLY, JOHNNIE
Address: 2076 MEADOW OAK CIRCLE
City-St-Zip: POLK CITY, FL 33868

Title: VP
Name: TRIBUTINO, CHARLENE
Address: 401 LAKE DRIVE
City-St-Zip: LAKELAND, FL 33813

Title: T
Name: AMERSON, BETTY
Address: 455 N. RESTWOOD AVE.
City-St-Zip: BARTOW, FL 33830

Title: S
Name: WILLIAMS, TERA
Address: 122 S. OWEN CIRCLE
City-St-Zip: AUBURNDAL, FL 33823 US

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: BETTY W. AMERSON

T

07/27/2012

Electronic Signature of Signing Officer or Director

Date