

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 09, 2005
Secretary of State

DOCUMENT# N15747

Entity Name: LEAGUE OF WOMEN VOTERS OF NORTH PINELLAS COUNTY, INC.**Current Principal Place of Business:**P.O. BOX 6833
CLEARWATER, FL 33758 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 6833
CLEARWATER, FL 33758 US**New Mailing Address:****FEI Number:** 59-2875134 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GILIOTTI, DIANNE W
2842 COUNTRY WOODS LANE
PALM HARBOR, FL 34683 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: GILIOTTI, DIANNE W
Address: 2842 COUNTRY WOODS LANE
City-St-Zip: PALM HARBOR, FL 34683**Title:** V () Delete
Name: AZARA, GERTRUDE
Address: 2035 ARBOR LANE
City-St-Zip: CLEARWATER, FL 33763**Title:** VPD () Delete
Name: GARVEY, RITA G
Address: 1550 RIDGEWOOD ST
City-St-Zip: CLEARWATER, FL 33755**Title:** S () Delete
Name: SCHILLMOLLER, VERENA L
Address: 1660 GULF BLVD, #1601
City-St-Zip: CLEARWATER, FL 33767**Title:** T () Delete
Name: BUDLONG, PATRICIA P
Address: 595 SANDY HOOK RD
City-St-Zip: PALM HARBOR, FL 34683**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** COP (X) Change () Addition
Name: AZARVA, GERTRUDE
Address: 2035 ARBOR LANE
City-St-Zip: CLEARWATER, FL 33763**Title:** COP (X) Change () Addition
Name: GUISE, SUSAN R
Address: 176 175TH TER. DR. E
City-St-Zip: REDINGTON SHORES, FL 33708**Title:** VP (X) Change () Addition
Name: MARTIN, JOYCE
Address: 19029 US HWY 19N #9410
City-St-Zip: CLEARWATER, FL 33764**Title:** S (X) Change () Addition
Name: CLEARY, LOUISE
Address: 300 EAST BAY DR.
City-St-Zip: LARGO, FL 33770**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D () Change (X) Addition
Name: GARRITY, JOANNE
Address: 922 GULLANE DR.
City-St-Zip: TARPON SPRINGS, FL 34689

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PATRICIA P. BUDLONG

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05/09/2005

Electronic Signature of Signing Officer or Director_____
Date