2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 08:00 AM
Secretary of State

DOCUMENT # N19228

1. Entity Name
GREATER FORT LAUDERDALE FLORIDA CHAPTER OF THE NATIONAL ASSOCIATION OF WOMEN IN CONSTRUCTION, IN

Principal Place of Business	Mailing Address
P.O. BOX 329 FT LAUDERDALE, FL 33302 US	P.O. BOX 329 FT LAUDERDALE, FL 33302 US

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04052006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-6177674

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KUPSKY, KATHERINE
10885 NW 6TH STREET
CORAL SPRINGS, FL 33071

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Katherine J Kupsky 4/10/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	T
NAME	KUPSKY, KATHERINE
STREET ADDRESS	10885 NW 6TH STREET
CITY-ST-ZIP	CORAL SPRINGS, FL 33071
TITLE	P
NAME	ZAHNISER, ALYCE
STREET ADDRESS	3575 NW 53RD ST
CITY-ST-ZIP	FORT LAUDERDALE, FL 33309
TITLE	D
NAME	BOLTON, EILEEN
STREET ADDRESS	3351 LEE ST
CITY-ST-ZIP	HOLLYWOOD, FL 33021
TITLE	D
NAME	NARVAEZ, AMITA M
STREET ADDRESS	1321 NW 58 AVE
CITY-ST-ZIP	FT LAUDERDALE, FL 33313
TITLE	PP
NAME	PRESTON, DIANA
STREET ADDRESS	4860 NE 12 AVE
CITY-ST-ZIP	FT LAUDERDALE, FL 33334
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/27/06-80036-011 70.00

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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.

SIGNATURE: Katherine J Kupsky 4/10/06 954 227-1840
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #