

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22795

FILED
Apr 08, 2011
Secretary of State

Entity Name: ALTAMONTE SPRINGS CITY EMPLOYEES ORGANIZATION, INC.

Current Principal Place of Business:

225 NEWBURYPORT AVENUE
CITY HALL
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

225 NEWBURYPORT AVENUE
CITY HALL
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

FEI Number: 59-2848368

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAURIE DAUGHERTY - FINANCE
225 NEWBURYPORT AVE
CITY HALL
ALTAMONTE SPRINGS, FL 32701 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
Name: WRIGHT, GINGER
Address: 225 NEWBURYPORT AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: PE
Name: ROWLAND, GAYLE
Address: 225 NEWBURYPORT AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: S
Name: HANSON, LISA
Address: 225 NEWBURYPORT AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: T
Name: DAUGHERTY, LAURIE
Address: 225 NEWBURYPORT AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: AC
Name: KOUELKA, VERONICA
Address: 225 NEWBURYPORT AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: AAF
Name: ADKINS, SIBIL
Address: 225 NEWBURYPORT AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: LAURIE DAUGHERTY

T

04/08/2011

Electronic Signature of Signing Officer or Director

Date