2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33410

FILED Mar 22, 2007 Secretary of State

Entity Name: MANATEE COUNTY GIRLS CLUB FOUNDATION, INC.

	Principal Place of Business:	New Principal Place of Business:
	ST. WEST TON, FL 34205	
Current N	Mailing Address:	New Mailing Address:
	ST. WEST TON, FL 34205	
FEI Number	r: 59-3000578 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
Name and	d Address of Current Registered Ager	nt: Name and Address of New Registered Agent:
936 14TH	E, BECKY ST. WEST TON, FL 34205 US	
	e named entity submits this statement for ee of Florida.	the purpose of changing its registered office or registered agent, or both
SIGNATU		
	Electronic Signature of Registere	d Agent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO
Title: Name: Address: City-St-Zip:	SD () Delete LACHAPELLE, GEORGE L 6108 OAK BLVD BRADENTON, FL 34209	Title: () Change () Addition Name: Address: City-St-Zip:
	,,	
Title: Name: Address: City-St-Zip:	M () Delete CANESSE, BECKY 936 14TH ST. WEST BRADENTON, FL 34205	Title: () Change () Addition Name: Address: City-St-Zip:
Name: Address: City-St-Zip: Title: Name: Address:	M () Delete CANESSE, BECKY 936 14TH ST. WEST	Title: () Change () Addition Name: Address:
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Name: Address:	M () Delete CANESSE, BECKY 936 14TH ST. WEST BRADENTON, FL 34205 1VPD () Delete PEEBLES, DOUG 1111 3RD AVE WEST BRADENTON, FL 34205 2VPD () Delete PRATT, JANE 1227 58TH ST WEST	Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: BECKY CANESSE M 03/22/2007