2007 NOT-FOR-PROFIT CORPORATION. ANNUAL REPORT

DOCUMENT # N33523

Entity Name

GWENDOLYN BROOKS WRITERS ASSOCIATION OF FLORIDA, INC.



FILED Mar 29, 2007 08:00 A Secretary of State

Principal Place of Business

Mailing Address

100 WELDON BLVD SANFORD, FL 32773-6199 P.O. BOX 724

SANFORD, FL 32772-0724 US



DO NOT WRITE IN THIS SPACE

03202007 No Chg-NP CR2E037 (4/06)

4. FEI Number Applied For 59-3015506 Not Applied be

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DAVID, TIMOTHY H. 781 MAITLAND AVE ALTAMONTE SPRINGS, FL 32715

DO NOT WRITE IN THIS SPACE

| | named entity submits this statement for the tions of registered agent. | e purpose of changing its registered | office or r | egistered agent, or b | oth, in the State of Florida. I am familiar with, and accept | | |
|---|---|---|----------------|--------------------------------|--|--|--|
| SIGNATURE_ | | | | | | | |
| | Signature, typed or printed name of registered agent and t | tile if applicable. (NOTE: Registered Ap | pent signaturi | a required when reinstating) | DATE | | |
| | Filing Fee is \$61.25 Due by May 1, 2007 | Election Campaign Financin Trust Fund Contribution. | og 🗆 | \$5.00 May Be Added to Fees | | | |
| 10. | OFFICERS AND DIRECTORS | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP WRIGHT, STEPHEN C 127 LANGSTON DR SANFORD, FL 32771 | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DV THOMPSON, ANTHONY C 127 LANGSTON DRIVE SANFORD, FL 32771 | IOMPSON, ANTHONY C 7 LANGSTON DRIVE | | | 000000683532 04/05/07-80046-016 61.25 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S HOLLIS, BARNEY J 127 LANGSTON DR SANFORD, FL 32771 | | | DO NOT WRITE | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DT REFOE, ANNYE L 422 N HAWTHORNE CIR WINTER SPRINGS, FL | | IN THIS SPACE | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | · · · · · · · · · · · · · · · · · · · | | | | | | |
| HILE | , | | | | | | |

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:

NAME STREET ADDRESS CITY-ST-ZIP

P Stephen CALDWELL WRICH: Merch 26, 2007

Merch 26, 2007 407-323-7184