

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42795

FILED
Feb 12, 2012
Secretary of State

Entity Name: WITHLAPOPKA, CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

11104 E. FLOUNDER
FLORAL CITY, FL 34436

New Principal Place of Business:

Current Mailing Address:

11104 E. FLOUNDER
FLORAL CITY, FL 34436

New Mailing Address:

FEI Number: 59-3063858

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGIUS, MARY
8110 S KIMBERLY CIRCLE
FLORAL CITY, FL 34436 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: VD
Name: TREXLER-CARR, JOY A
Address: 11610 LAUREL CT
City-St-Zip: FLORAL CITY, FL 34436

Title: TD
Name: RUSHFORD, MARGARET
Address: 5705 S WITHLAPOPKA DR
City-St-Zip: FLORAL CITY, FL 34436

Title: PD
Name: AGIUS, MARY
Address: 8110 S KIMBERLY CIRCLE
City-St-Zip: FLORAL CITY, FL 34436

Title: SD
Name: KITSCH, SHARON
Address: 5925 S AMRLIN DR
City-St-Zip: FLORAL CITY, FL 34436

Title: D
Name: FANCHER, JUDITH
Address: 5959 S MARLIN DR
City-St-Zip: FLORAL CITY, FL 34436

Title: D
Name: LEASHEFSKI, HELEN
Address: 11610 LAUREL COURT
City-St-Zip: FLORAL CITY, FL 34436

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: MARY AGIUS

PD

02/12/2012

Electronic Signature of Signing Officer or Director

Date