

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45438

FILED  
Jan 28, 2008  
Secretary of State

**Entity Name:** THE NATIONAL ASSOCIATION OF WOMEN BUSINESS OWNERS THE LAKE LAND METRO CHAPTER, INC.

**Current Principal Place of Business:**

POST OFFICE BOX 5028  
LAKE LAND, FL 33807

**New Principal Place of Business:**

4640 CLEVELAND HEIGHTS BLVD.  
LAKE LAND, FL 33813

**Current Mailing Address:**

POST OFFICE BOX 5028  
LAKE LAND, FL 33807

**New Mailing Address:**

**FEI Number:** 59-3006293      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JARRET, AMANDA P  
CLARK CAMPBELL & MAWHINNEY P.A.  
500 S FLA AVE ST 800 , P.O. BOX 24627  
LAKE LAND, FL 33802 US

**Name and Address of New Registered Agent:**

JARRET, AMANDA P  
CLARK CAMPBELL & MAWHINNEY P.A.  
500 S FLA AVE ST 800  
LAKE LAND, FL 33801 US

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:

01/28/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TD ( ) Delete  
Name: CAREY, ROSE  
Address: 3330 E MAIN STREET  
City-St-Zip: LAKE LAND, FL 33801

Title: P ( ) Delete  
Name: SWARTZWELDER, LANA  
Address: 6935 CARTER ROAD  
City-St-Zip: LAKE LAND, FL 33813

Title: PE ( ) Delete  
Name: MAROTZ, CYNTHIA  
Address: 3081 SLEEPLECHASE DR  
City-St-Zip: LAKE LAND, FL 33811

Title: S (X) Delete  
Name: BURTZ, MONZ  
Address: 1420 MAOLE ST  
City-St-Zip: LAKE LAND, FL 33810

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: TD (X) Change ( ) Addition  
Name: JEZARD, LINDA  
Address: 8 LOMA LINDA  
City-St-Zip: LAKE LAND, FL 33813

Title: P (X) Change ( ) Addition  
Name: HAEUSLER, SHARON  
Address: 4640 CLEVELAND HEIGHTS BLVD.  
City-St-Zip: LAKE LAND, FL 33813

Title: S (X) Change ( ) Addition  
Name: MATHER, CAROLYNNE  
Address: 932 MLK JR. AVE  
City-St-Zip: LAKE LAND, FL 33815

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: LINDA JEZARD

TD

01/28/2008

Electronic Signature of Signing Officer or Director

Date