## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000001028

FILED Jan 08, 2010 Secretary of State

Entity Name: POLK COUNTY CHAPTER PARENTS, FAMILIES & FRIENDS OF LESBIANS AND GAYS, INC.

Current Principal Place of Business: New Principal Place of Business:

519 CRESAP STREET LAKELAND, FL 33815 US

Current Mailing Address: New Mailing Address:

PO BOX 1739

AUBURNDALE, FL 33823 US

FEI Number: 59-3275559 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GLAZIER, GLEN E TREAS 6409 CHAROLAIS DR. LAKELAND, FL 33810 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: I

Name: MULDER, LYNN Address: PO BOX 1739

City-St-Zip: AUBURNDALE, FL 33823

Title: DS

Name: THOMPSON, WARREN Address: PO BOX 1606

City-St-Zip: WINTER HAVEN, FL 338821606

Title: DBM

Name: TEETER, CARROLL Address: 725 AVE Q. SE

City-St-Zip: WINTER HAVEN, FL 33880

Title: DV

Name: GLAZIER, ALESA Address: 6409 CHAROLAIS DRIVE City-St-Zip: LAKELAND, FL 33810

Title: T

Name: GLAZIER, GLEN E Address: 6409 CHAROLAIS DR. City-St-Zip: LAKELAND, FL 33810

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: GLEN E. GLAZIER TREA 01/08/2010