2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
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Secretary of State

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

Current Principal Place of Business:

519 CRESAP STREET
LAKELAND, FL 33815 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1739
AUBURNDALE, FL 33823 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

GLAZIER, GLEN E TREAS
6409 CHAROLAIS DR.
LAKELAND, FL 33810 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: P
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: 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 01/06/2011

Electronic Signature of Signing Officer or Director Date