## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000003239

FILED Mar 15, 2010 Secretary of State

Entity Name: POLK COUNTY WORKFORCE DEVELOPMENT BOARD, INC.

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

600 N. BROADWAY AVENUE

В

BARTOW, FL 33830

Current Mailing Address: New Mailing Address:

600 N. BROADWAY AVENUE

В

BARTOW, FL 33830

FEI Number: 59-3385244 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

LANG, THOMAS F SHUFFIELD, LOWMAN, & WILSON P.A. GATEWAY CENTER 1000 LEGION PL STE1700 ORLANDO, FL 32801 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:**

Title: CD

 Name:
 WALKER, PHILLIP E

 Address:
 3119 US HWY 98 N

 City-St-Zip:
 LAKELAND, FL 33805

Title: STD
Name: TILL, DICK
Address: 251 AVE A. SW

City-St-Zip: WINTER HAVEN, FL 33880

Title:

 Name:
 TARR, GARY

 Address:
 2222 INTERSTATE DR

 City-St-Zip:
 LAKELAND, FL 33805

Title:

Name: TIENCKEN, EDITH
Address: 510 8TH STREET S
City-St-Zip: DUNDEE, FL 33838

Title:

Name: MILLER, LARRY

Address: 9150 WEST LAKE RUBY DRIVE City-St-Zip: WINTER HAVEN, FL 33884

Title: [

Name: WILKERSON, MICHAEL C Address: 1159 LONGWOOD OAKES BLVD

City-St-Zip: LAKELAND, FL 33811

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: STACY CAMPBELL-DOMINECK CEO 03/15/2010