

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000009297

**FILED**  
**Apr 04, 2016**  
**Secretary of State**  
**CC4616639935**

**Entity Name:** MARY CUSTIS LEE CHAPTER #1451, UNITED DAUGHTERS OF THE CONFEDERACY, INC.

**Current Principal Place of Business:**

1704 GOLF VIEW DR  
BELLEAIR, FL 33756-1542

**Current Mailing Address:**

1704 GOLF VIEW DR  
BELLEAIR, FL 33756-1542 US

**FEI Number: 59-6200360**

**Certificate of Status Desired: Yes**

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

FOLWELL, DORRIS  
1704 GOLF VIEW DR  
BELLEAIR, FL 33756 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

**Officer/Director Detail :**

Title P  
Name CARMICHAEL, VICKIE M  
Address 1955 COBBLESTONE WAY  
City-State-Zip: CLEARWATER FL 33760-1621

Title T  
Name FOLWELL, DORRIS Y  
Address 1704 GOLF VIEW DR  
City-State-Zip: BELLEAIR FL 33756-1542

Title S  
Name BYTHER, DIANA  
Address 8501 ROBIN ROAD  
City-State-Zip: LARGO FL 33777-3419

*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: DORRIS Y NAVE FOLWELL

TREASURER

04/04/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date