

2013 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N12000002638

Entity Name: AMERICAN ASSOCIATION OF UNIVERSITY WOMEN FORT MYERS/LEE COUNTY BRANCH, INC.

Current Principal Place of Business:

2808 SW 45TH STREET
CAPE CORAL, FL 33914

Current Mailing Address:

P.O. BOX 2115
FORT MYERS, FL 33902-2115 US

FEI Number: 46-3596470

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SCHNEIDER, ELLEN R
2808 SW 45TH STREET
CAPE CORAL, FL 33914 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 GLASGOW, MARIE M
Address P.O. BOX 2115
City-State-Zip: FORT MYERS FL 33902-2115

Title VP
Name HARDEN, SUZAN
Address P.O. BOX 2115
City-State-Zip: FORT MYERS FL 33902-2115

Title VP
Name KUYOTH, NANCY
Address P.O. BOX 2115
City-State-Zip: FORT MYERS FL 33902-2115

Title VP
Name SIRIANO, SHELLEY
Address P.O. BOX 2115
City-State-Zip: FORT MYERS FL 33902-2115

Title SECT
Name KARCHUNAS, NANCY
Address P.O. BOX 2115
City-State-Zip: FORT MYERS FL 33902-2115

Title TREA
Name SCHWARZ, JAYNE
Address P.O. BOX 2115
City-State-Zip: FORT MYERS FL 33902-2115

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: MARIE M. GLASGOW

PRESIDENT

09/14/2013

Electronic Signature of Signing Officer/Director Detail

Date