

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16801

Entity Name: GIRL SCOUTS OF SOUTHEAST FLORIDA, INC.**Current Principal Place of Business:**6944 LAKE WORTH ROAD
LAKE WORTH, FL 33467**Current Mailing Address:**6944 LAKE WORTH ROAD
LAKE WORTH, FL 33467 US**FEI Number:** 59-0657327**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JOHNSON, LISA Y
6944 LAKE WORTH RD
LAKE WORTH, FL 33467 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 C,D
Name BROWN-BURTON, LORNA E
Address 6944 LAKE WORTH ROAD
City-State-Zip: LAKE WORTH FL 33467

Title T,D
Name SHAFFER, CHARLES (CHUCK)
Address 6944 LAKE WORTH ROAD
City-State-Zip: LAKE WORTH FL 33467

Title S,D
Name STETSON, MARYANN
Address 6944 LAKE WORTH ROAD
City-State-Zip: LAKE WORTH FL 33467

Title CEO
Name JOHNSON, LISA Y
Address 6944 LAKE WORTH ROAD
City-State-Zip: LAKE WORTH FL 33467

Title VC,D
Name DONNALLY, TAMI
Address 6944 LAKE WORTH ROAD
City-State-Zip: LAKE WORTH FL 33467

Title CFO
Name MAHARAJ, ALLYSON
Address 6944 LAKE WORTH ROAD
City-State-Zip: LAKE WORTH FL 33467

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: ALLYSON MAHARAJ

CFO

04/06/2018

Electronic Signature of Signing Officer/Director Detail_____
Date