
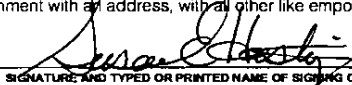


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 10, 2008 8:00 am
Secretary of State

06-10-2008 90002 026 ****70.00

DOCUMENT # 721697			
1. Entity Name TALLAHASSEE, FLORIDA CHAPTER OF THE NATIONAL ASSOCIATION OF WOMEN IN CONSTRUCTION, INC.			
Principal Place of Business 2870 INDUSTRIAL PLAZA TALLAHASSEE, FL 32301		Mailing Address P.O. BOX 1533 P.O. BOX 1533 TALLAHASSEE, FL 32302 US	
2. Principal Place of Business - No P.O. Box # 1010 Mimosa Drive Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State Tallahassee, FL		City & State	
Zip 32312	Country USA	Zip	Country
4. FEI Number 23-7354786		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WILSON, JACKIE 2870 INDUSTRIAL PLAZA DR TALLAHASSEE, FL 32301		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
1010 Mimosa Dr		1010 Mimosa Dr	
City		City	
Tallahassee		Tallahassee	
FL		FL	
Zip Code		Zip Code	
32312		32312	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____			
Filing Fee is \$61.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE P NAME YAWN, ELAINE STREET ADDRESS 2870 INDUSTRIAL PLAZA DR CITY-ST-ZIP TALLAHASSEE, FL 32301	<input checked="" type="checkbox"/> Delete	TITLE P NAME Gray, Phyllis STREET ADDRESS 3011 Lang Drive CITY-ST-ZIP Tallahassee, FL 32303	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE V NAME GRAY, PHYLLIE STREET ADDRESS 1018 THOMASVILLE RD CITY-ST-ZIP TALLAHASSEE, FL 32303	<input checked="" type="checkbox"/> Delete	TITLE VD NAME Davis Sandra STREET ADDRESS 4512 Broad Haven Lane CITY-ST-ZIP Tallahassee, FL 32309	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE S NAME RUDD, MISSY STREET ADDRESS 1689-A MAHEN CENTER BLVD CITY-ST-ZIP TALLAHASSEE, FL 32308	<input checked="" type="checkbox"/> Delete	TITLE S NAME Rice, Tina STREET ADDRESS 4899 Capital Circle NW CITY-ST-ZIP Tallahassee, FL 32303	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE T NAME JOHNSON, JUDITH STREET ADDRESS 2870 INDUSTRIAL PLAZA DR CITY-ST-ZIP TALLAHASSEE, FL 32301	<input checked="" type="checkbox"/> Delete	TITLE T NAME Hastings, Susan STREET ADDRESS 6235w Mount Olive Church Rd CITY-ST-ZIP Lanett, FL 32336	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		Date: 6-9-08	Daytime Phone #: 850-656-2344
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

ATTACHMENT

40108125



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Document Number 721697
 Business Entity Name TALLAHASSEE, FLORIDA CHAPTER OF THE NATIONAL ASSOCIATION OF WOMEN IN CONSTRUCTION, INC.
 FEI Number 237354786
 FEI Number Status
 Certificate of Status Desired Yes

Election Campaign Financing Trust Fund Contribution No

Principal Place of Business

Address 1010 MIMOSA DRIVE
 City, State TALLAHASSEE, FL
 Zip Code & Country 32312

Mailing Address

Address PO BOX 1533
 City, State TALLAHASSEE, FL
 Zip Code & Country 32302

Name And Address of Registered Agent

Name (Last, First, Middle, Title) WILSON, JACKIE
 Address 1010 MIMOSA DRIVE
 City, State TALLAHASSEE, FL
 Zip Code & Country 32312 US
 Registered Agent Signature JACKIE WILSON

Officer/Director Name And Address

Name And Address #1

Title P
 Name (Last, First, Middle, Title) GRAY, PHYLLIS
 Street Address 3011 LANG DRIVE
 City, State TALLAHASSEE, FL
 Zip Code & Country 32303

Name And Address #2

Title V
 Name (Last, First, Middle, Title) DAVIS, SANDRA
 Street Address 4512 BROAD HAVEN LANE
 City, State TALLAHASSEE, FL
 Zip Code & Country 32309

Name And Address #3

Title S
 Name (Last, First, Middle, Title) RICE, TINA
 Street Address 4899 CAPTIAL CIRCLE NW
 City, State TALLAHASSEE, FL
 Zip Code & Country 32303

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#721697

Name And Address #4

Title T
Name (Last, First, Middle, Title) HASTINGS, SUSAN
Street Address 2811-G INDUSTRIAL DR
City, State TALLAHASSEE, FL
Zip Code & Country 32301

Title P
Officer/Director Signature PHYLLIS GRAY

Continue