

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 31, 2009
Secretary of State

DOCUMENT# 721697

Entity Name: TALLAHASSEE, FLORIDA CHAPTER OF THE NATIONAL ASSOCIATION OF WOMEN IN CONSTRUCTION, INC.

Current Principal Place of Business:

1010 MIMOSA DRIVE
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1533
P.O. BOX 1533
TALLAHASSEE, FL 32302 US

New Mailing Address:

FEI Number: 23-7354786 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WILSON, JACKIE
1010 MIMOSA DR
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

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: P () Delete
Name: GRAY, PHYLLIS
Address: 3011 LONG DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: VD () Delete
Name: DAVIS, SANDRA
Address: 4512 BROAD HAVEN LANE
City-St-Zip: TALLAHASSEE, FL 32309

Title: S () Delete
Name: RICE, TINA
Address: 4899 CAPITAL CIRCLE NW
City-St-Zip: TALLAHASSEE, FL 32303

Title: T () Delete
Name: HASTINGS, SUSAN
Address: 6233 W MOUNT OLIVE CHURCH RD
City-St-Zip: LAMONT, FL 32336

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DAVIS, SANDRA
Address: 4512 BROAD HAVEN LANE
City-St-Zip: TALLAHASSEE, FL 32309

Title: VP (X) Change () Addition
Name: BENNETT, LICHEA
Address: 3472 WEEEMS RD, UNIT 1
City-St-Zip: TALLAHASSEE, FL 32317

Title: S (X) Change () Addition
Name: BERGSTROM, BARBARA J
Address: 2145 DELTA BLVD. STE. 100
City-St-Zip: TALLAHASSEE, FL 32303

Title: T (X) Change () Addition
Name: BAILEY, REBECCA A
Address: 1080 COMMERCE BLVD
City-St-Zip: MIDWAY, FL 32343

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SANDRA DAVIS

P

08/31/2009

Electronic Signature of Signing Officer or Director

_____ Date