2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2001 8:00 am
Secretary of State
04-27-2001 90220 050 ****61.25

DOCUMENT # 707191

1. Entity Name

GFWC TEMPLE TERRACE JUNIOR WOMAN'S CLUB, INC.

Principal Place of Business	Mailing Address
415 WOODMONT AVE P.O. BOX 16206 TEMPLE TERRACE FL 33687 US	415 WOODMONT AVE PO BOX 16206 TEMPLE TERRACE FL 33687 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1055074 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FITZPATRICK, JULIE D 10207 N. HYALEAH ROAD TAMPA FL 33617	Name: Nancy A. Guy Street Address (P.O. Box Number is Not Acceptable): 9301 River Cove Dr. City: Riverview FL Zip Code: 33569

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.

SIGNATURE: Nancy A. Guy Nancy A. Guy 4-9-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HANCOCK, KELLY 11885 RAINTREE DR. TEMPLE TERRACE FL 33617	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Kim Whitaker 8211 Steamboat Ln Tampa, FL 33617	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LAUTERIA, TINA 6617 WHITEWAY DR TEMPLE TERRACE FL 33617	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Ruth Morris 5618 Oakland Dr. Tampa, FL 33617	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MORRIS, RUTH 5618 OAKLAND DR. TAMPA FL 33617	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Pat Behite 312 Glen Burnie Ave Temple Terrace, FL 33617	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD PALMER, CHARLA 411 DEER PARK AVE. TEMPLE TERRACE FL 33617	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Debbie Baker 7509 E 113th Ave Temple Terrace, FL 33617	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD FITZPATRICK, JULIE D 10207 N. HGALEAH RD. TAMPA FL 33617	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Nancy Guy 9301 River Cove Dr. Riverview, FL 33569	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BAKER, DEBBIE 7809 E. 113TH AVE. TEMPLE TERRACE FL 33617	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Tina Lauteria 16617 Whiteway Dr Temple Terrace, FL 33617	☑ Change ☐ Addition

CR2E037 (10/00)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: SIGNATURE REQUIRED 4-17-01 813-281-4635
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #