

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2008 8:00 am
Secretary of State

01-18-2008 90005 033 ****61.25

DOCUMENT # 710972
 1. Entity Name
 COMMUNITY WOMAN'S CLUB, INC.



Principal Place of Business
 5 ROSA L. JONES DRIVE
 COCOA, FL 32922

Mailing Address
 P.O. BOX 1043
 COCOA, FL 32922

40005942



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

01142008 Chg-NP CR2E037 (12/06)

City & State

4. FEI Number
 59-6158814

Applied For
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 MCAFEE, DARTHY V
 1212 JAPONICA LN
 COCOA, FL 32922

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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 reappointing) DATE

Filing Fee is \$61.25 Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. \$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 PD
 NAME MCAFEE, DARTHY
 STREET ADDRESS 1212 JAPONICA LN
 CITY-ST-ZIP COCOA, FL 32922 Delete

TITLE SD
 NAME LOUDEN, LINDA
 STREET ADDRESS 547 DELANNOY AVE
 CITY-ST-ZIP COCOA, FL 32922 Change Addition

TITLE TD
 NAME WILSON, BETTY
 STREET ADDRESS PO BOX 986
 CITY-ST-ZIP COCOA, FL 329230896 Delete

TITLE VD
 NAME RYDER, JEANNE
 STREET ADDRESS 1120 EL DORADO DR
 CITY-ST-ZIP ROCKLEDGE, FL 32955 Change Addition

TITLE VD
 NAME WILLIAMS, MILDRED
 STREET ADDRESS 1705 CAMBRIDGE DR
 CITY-ST-ZIP COCOA, FL 32922 Delete

TITLE SD
 NAME MURICO, CARMELA
 STREET ADDRESS 442 WENTHROP CIR
 CITY-ST-ZIP ROCKLEDGE, FL 32955 Change Addition

TITLE VD
 NAME URSSING, MELBA
 STREET ADDRESS 55 RIVERSIDE DR
 CITY-ST-ZIP COCOA, FL 32922 Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Change Addition

TITLE VD
 NAME LOUDEN, LINDA
 STREET ADDRESS 547 DELANNOY AVE
 CITY-ST-ZIP COCOA, FL 32922 Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Change Addition

TITLE SD
 NAME RYDER, JEANNE
 STREET ADDRESS 1120 EL DORADO DR
 CITY-ST-ZIP ROCKLEDGE, FL 32955 Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Change 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: Betty M. Wilson Betty Wilson, Treasurer (321)639-4193
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 01-15-2008 Daytime Phone #