

**FILE NOW: FILING FEE IS \$61.25**

**FILED**  
**Jan 30 1998 8:00am**  
**Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 723177 (2)**  
 1. Corporation Name  
**GFWC-CLEARWATER COMMUNITY WOMAN'S CLUB, INC.**



Principal Place of Business 1518 MEADOW DALE DR CLEARWATER FL 34624-2575 US	Mailing Address PO BOX 6074 P.O. BOX 6074 CLEARWATER FL 34618 US
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3. Date Incorporated or Qualified <b>04/14/1972</b>	Applied For Not Applicable
4. FEI Number <b>23-7241338</b>	
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	30
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**9. Name and Address of Current Registered Agent**

**DENNARD, MERLE T**  
 1545 OAK LANE  
 CLEARWATER FL 33546

**10. Name and Address of New Registered Agent**

81 Name <b>YATES, TRUDY J.</b>	85 Zip Code <b>34683-1900</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>3022 HIDDEN HILLS. DR.</b>	
83	
84 City <b>PALM HARBOR</b>	<b>FL</b>

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE TRUDY J. YATES *Trudy J. Yates* January 15, 1998  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**12. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JUSTICE, MARIAN 1912 CLEVELAND ST CLEARWATER FL	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V TOBIASSEN, MARTHA 2007 N POINT ALEXIS DR TARPON SPRGS FL	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CASSELS, MARELLA 1924 NURSERY RD CLEARWATER, FL 00000	<input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BLACKWOOD, MARGUERITE 1518 MEADOW DALE DR CLEARWATER FL	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BLACKMON, MARY 830 S GULFVIEW III 104 CLEARWATER FL	<input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FALCO, PATRICIA 2359 GLENMOOR ROAD N. CLEARWATER FL 34624	<input checked="" type="checkbox"/> DELETE

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	Vice President Henning, Patricia 400 Ponce De Leon Blvd. Clearwater, Fl 33756-1468	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Vice President Cason, Jeanette 1349 Eastfield Dr. Clearwater, Fl. 33764	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	Treasurer Yates, Trudy 3022 Hidden Hills Dr. Palm Harbor, FL 34683-1900	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 617.0502, Florida Statutes, and that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Trudy J. Yates* TRUDY J. YATES 1/15/98 813-781-4983

CR2E037 (10/97)