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Feb 13 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 733072 (3)  
1. Corporation Name  
GFWC WOMAN'S CLUB OF CLEARWATER, INC.



Principal Place of Business Mailing Address  
C/O MARY M. WURMLE, TREASURER  
2171 PINE RIDGE DRIVE  
CLEARWATER FL 34623

3. Date Incorporated or Qualified 06/13/1975  
3a. Date of Last Report 03/14/1996

2. Principal Place of Business 21 C/O ELSIE GERHARDT, TR  
22 2434 Australia E., #40  
23 Clearwater, FL 34623  
24 34623 25 PINELLAS

4. FEI Number 59-1637435  
5. Certificate of Status Desired \$8.75 Additional Fee Required  
6. Election Campaign Financing \$5.00 May Be Added to Fees  
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
STOHRER, WILLIAM MRS.  
STRATFORD COURT  
45 KATHARINE BOULEVARD, #222  
PALM HARBOR FL 34684

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD RICE, ROSE 901 PALM BLVD DUNEDIN FL	<input checked="" type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
TITLE	VP DINNSEN, JEANNE 2263 LAKE ARBOR BLVD CLEARWATER FL	<input checked="" type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
TITLE	SD KEPLER, ETHEL 667 HARBOR ISLAND CLEARWATER FL	<input checked="" type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE	T WURMLE, MARY 2171 PINE RIDGE DR CLEARWATER FL	<input checked="" type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE	VP BERGERON, MARY 1321 EDMONTON DR CLEARWATER FL	<input checked="" type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	PD DINNSEN, JEANNE 2263 Lake Arbor Blvd. Clearwater, FL 34623
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	VP BERGERON, MARY 1321 Edmonton Dr. Clearwater, FL 34616
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	SD HOSTETLER, BETTE 107 N. Cirrus Ave., Clearwater, FL 34625
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TD GERHARDT, ELSIE 2434 Australia Way E., #40 Clearwater, FL 34623
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	VP HALO, JEAN 1099 McMullen Booth, Apt. 114 Clearwater, FL 34619
<input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I do 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 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: \_\_\_\_\_ SIGNATURE REQUIRED February 5, 1997 813-791-4213  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0067820

CR2E037 (9/96)