


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2008 8:00 am
Secretary of State

03-03-2008 90186 028 ****70.00

DOCUMENT # 733072
 1. Entity Name
GFWC WOMAN'S CLUB OF CLEARWATER, INC.



Principal Place of Business Mailing Address
C/O SHERRILL ROBERSON **C/O SHERRILL ROBERSON**
1631 DALE CIR. SO. **1631 DALE CIR. SO.**
DUNEDIN, FL 34698 US **DUNEDIN, FL 34698 US**



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
C/O Caroline Brown **2100 Nursery Rd**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
2100 Nursery Rd B20 **B20**

02272008 Chg-NP CR2E037 (12/06)

City & State City & State
Clearwater FL **Clearwater**

4. FEI Number Applied For
59-1637435 Not Applicable

Zip Country Zip Country
33764 **Pinellas** **33764** **Pinellas**

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

8. Name and Address of Current Registered Agent
ROBERSON, SHERRILL
631 DALE CIRCLE SOUTH
DUNEDIN, FL 34698

7. Name and Address of New Registered Agent
 Name **Caroline Brown**
 Street Address (P.O. Box Number is Not Acceptable) **2100 Nursery Rd B20**
 City **Clearwater** FL Zip Code **33764**

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 *Caroline Brown* DATE Feb 26, 2008
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VP DOLE, LUCILLE 2331 BELLAIR RD, #813 CLEARWATER, FL 33764	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CS EDIE, LORRAINE 2513B OAK LEAF LN CLEARWATER, FL 33763	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WURMLEY, NANCY 2136 SCOTLAND DR CLEARWATER, FL 33763	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROBERSON, SHERRILL 1631 DALE CIR. SO. DUNEDIN, FL 34698	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LOWACK, MICHELLE 12712-110TH ST. NO LARGO, FL 33778	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Michelle Lowack Pres 12712 110th St. No Largo FL 33778	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Tammy Harkins VP 1620 Sandstone Ct. Clearwater FL 33756	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Patti Cain 2VP 3300 N. Alt 19 #172 Dunedin FL 34698	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Erene Cuerdon RSec 1406 Fairway Dr. Dunedin FL 34698	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Caroline Brown Treas 2100 Nursery Rd B20 Clearwater FL 33764	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Janet Hauser Dir 2204 Sequoia Dr. Clearwater FL 33763	<input type="checkbox"/> Change <input checked="" type="checkbox"/> 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: *Caroline Brown* DATE Feb 26, 2008 DAYTIME PHONE # 727-504-8144
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR