

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740124

FILED
Feb 26, 2011
Secretary of State

Entity Name: GFWC SANTA ROSA WOMAN'S CLUB INC.

Current Principal Place of Business:

200 LAURA LANE
GULF BREEZE, FL 32561 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 423
GULF BREEZE, FL 325620423 US

New Mailing Address:

FEI Number: 59-1709451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PFEIFFER, CAROLYN MRS.
4304 HICKORY SHORES BLVD.
GULF BREEZE, FL 32563 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: MCMAHAN-HARPER, TRACIE
Address: 4553 KELLY LANE
City-St-Zip: GULF BREEZE, FL 32563 US

Title: PE
Name: PRICE, JO-ANN
Address: 85 CHANTECLAIRE CIRCLE
City-St-Zip: GULF BREEZE, FL 32561 US

Title: 1VP
Name: FINDLEY, BENI
Address: 4904 HICKORY SHORES BLVD
City-St-Zip: GULF BREEZE, FL 32563 US

Title: RS
Name: HARRIS, JEANNE
Address: 1184 MARY KATE DRIVE.
City-St-Zip: GULF BREEZE, FL 32563 US

Title: T
Name: CAMPBELL, ANNA
Address: 200 LAURA LANE
City-St-Zip: GULF BREEZE, FL 32561 US

Title: CS
Name: SANDFORT, LOLLY
Address: 4623 SOUNDSIDE DRIVE
City-St-Zip: GULF BREEZE, FL 32563 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ANNA CAMPBELL

TREA

02/26/2011

Electronic Signature of Signing Officer or Director

Date