2-9-95 B-1049-C

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CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -9 AM 11:22

DOCUMENT # N49459 (3)

1. Corporation Name

GFWC MELBOURNE WOMAN'S CLUB INC.

Principal Place of Business	Mailing Address
PO BOX 2212 MELBOURNE FL 32902-2212	PO BOX 2212 MELBOURNE FL 32902-2212

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/21/1992
3a. Date of Last Report: 03/15/1994
4. FEI Number: 59-1711010 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

SMITH, JIMMIE GODWIN
500 W FEE AVE
MELBOURNE FL 32901

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P ☒ Change ☐ Addition
NAME	MULLINS, RETHA	1.2 NAME	SEVERANCE, BESSIE
STREET ADDRESS	4112 KNIGHT AVE.	1.3 STREET ADDRESS	713 Badger Dr. N.E.
CITY-ST-ZIP	MELBOURNE FL	1.4 CITY-ST-ZIP	Palm Bay, FL 32905-5809
TITLE	V	2.1 TITLE	V ☒ Change ☐ Addition
NAME	WESTPHAL, ANNE	2.2 NAME	LUCCI, CARMELLE
STREET ADDRESS	900 BROOKSIDE DR.	2.3 STREET ADDRESS	2424 FLICKER PLACE
CITY-ST-ZIP	INDIALANTIC FL	2.4 CITY-ST-ZIP	MELBOURNE, FL. 32904-8013
TITLE	S	3.1 TITLE	S ☒ Change ☐ Addition
NAME	SEVERANCE, BESSIE	3.2 NAME	GUY KATHI
STREET ADDRESS	713 BADGER DR. NE	3.3 STREET ADDRESS	473 LINDA AVE.
CITY-ST-ZIP	PALM BAY FL	3.4 CITY-ST-ZIP	MELBOURNE AVE 32935-3325
TITLE	D	4.1 TITLE	THIRD VP ☒ Change ☐ Addition
NAME	DREHER, SHEILA	4.2 NAME	WOODLEY TRONA
STREET ADDRESS	657 SPRING LAKE DR.	4.3 STREET ADDRESS	4034 MARLBERRY LN.
CITY-ST-ZIP	MELBOURNE FL	4.4 CITY-ST-ZIP	MELBOURNE, FL 32904-8417
TITLE	TD	5.1 TITLE	TD ☒ Change ☐ Addition
NAME	PHELPS, ELLA MAY	5.2 NAME	MARION DE CROVE
STREET ADDRESS	887 VAN BUREN ST	5.3 STREET ADDRESS	60 CORAL SEA WAY #18
CITY-ST-ZIP	MELBOURNE FL	5.4 CITY-ST-ZIP	SATELLITE BEACH, FL 32937-2842
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	SMITH, JIMMIE	6.2 NAME	
STREET ADDRESS	500 W. FEE AVE.	6.3 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Marion De Crove 2/3/95 - 407-779-8131
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
MARION DE CROVE

0035245