

FILE NOW: FILING FEE IS \$61.25

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Jan 30 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham 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

04/14/1972

4. FEI Number

23-7241338

Applied For
☐ Yes ☒ No

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. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

81 Name **YATES, TRUDY J.**

82 Street Address (P.O. Box Number is Not Acceptable)
3022 HIDDEN HILLS. DR.

83

84 City **PALM HARBOR**

FL

85 Zip Code
34683-1900

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**

Signature, typed or printed name of registered agent and title if applicable.

Trudy J. Yates

January 15, 1998

(NOTE: Registered Agent signature required when reinstalling)

12. OFFICERS AND DIRECTORS

TITLE	SD	<input type="checkbox"/> DELETE
NAME	JUSTICE, MARIAN	
STREET ADDRESS	1912 CLEVELAND ST	
CITY-ST-ZIP	CLEARWATER FL	

TITLE	V	<input type="checkbox"/> DELETE
NAME	TOBIASSEN, MARTHA	
STREET ADDRESS	2007 N POINT ALEXIS DR	
CITY-ST-ZIP	TARPON SPRGS FL	

TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	CASSELS, MARELLA	
STREET ADDRESS	1924 NURSERY RD	
CITY-ST-ZIP	CLEARWATER, FL 00000	

TITLE	PD	<input type="checkbox"/> DELETE
NAME	BLACKWOOD, MARGUERITE	
STREET ADDRESS	1518 MEADOW DALE DR	
CITY-ST-ZIP	CLEARWATER FL	

TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	BLACKMON, MARY	
STREET ADDRESS	830 S GULFVIEW III 104	
CITY-ST-ZIP	CLEARWATER FL	

TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	FALCO, PATRICIA	
STREET ADDRESS	2359 GLENMOOR ROAD N.	
CITY-ST-ZIP	CLEARWATER FL 34624	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Vice President
3.3 STREET ADDRESS	Henning, Patricia
3.4 CITY-ST-ZIP	400 Ponce De Leon Blvd. Clearwater, FL 33756-1468

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Vice President
5.3 STREET ADDRESS	Cason, Jeanette
5.4 CITY-ST-ZIP	1349 Eastfield Dr. Clearwater, FL 33764

6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Treasurer
6.3 STREET ADDRESS	Yates, Trudy
6.4 CITY-ST-ZIP	3022 Hidden Hills Dr. Palm Harbor, FL 34683-1900

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)