

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2001 8:00 am
Secretary of State

04-11-2001 90126 021 ****61.25

DOCUMENT # 723177

1. Entity Name

GFWC-CLEARWATER COMMUNITY WOMAN'S CLUB, INC.

Principal Place of Business

**2460 PERSIAN DR
 #34
 CLEARWATER FL 33763
 US**

Mailing Address

**PO BOX 6074
 P.O. BOX 6074
 CLEARWATER FL 34618
 US**

2. Principal Place of Business

400 PONCE DE LEON BLVD

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

CLEARWATER FL

City & State

Zip
33756

Country
USA

Zip

Country

4. FEI Number

23-7241338

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**YATES, TRUDY J
 3022 HIDDEN HILLS DR
 PALM HARBOR FL 34683**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE **SD** ☒ Delete
 NAME **JOHANSEN, FRANCES**
 STREET ADDRESS **52 PENZANCE CT**
 CITY-ST-ZIP **SAFETY HARBOR FL 34695**

TITLE **V** ☐ Delete
 NAME **JENSEN, GEORGIA**
 STREET ADDRESS **1641 SANTA BARBARA DR**
 CITY-ST-ZIP **DUNEDIN FL 34698**

TITLE **VP** ☐ Delete
 NAME **HENNING, PATRICIA**
 STREET ADDRESS **400 PONCE DE LEON BLVD**
 CITY-ST-ZIP **CLEARWATER, FL 00000 33756**

TITLE **PD** ☒ Delete
 NAME **CASSELLS, MARELLA**
 STREET ADDRESS **2460 PERSIAN DR., #34**
 CITY-ST-ZIP **CLEARWATER FL 33763**

TITLE **VP** ☒ Delete
 NAME **LEE, ELLIE**
 STREET ADDRESS **1863 OAKDALE LAKE N**
 CITY-ST-ZIP **CLEARWATE FL 33764**

TITLE **T** ☐ Delete
 NAME **MEIER, SUE**
 STREET ADDRESS **3266 SAN BERNADINO ST**
 CITY-ST-ZIP **CLEARWATER FL 33759**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **V/D** ☒ Change ☐ Addition
 NAME **2ND VICE PRESIDENT**
 STREET ADDRESS **MARY EASTON**
 CITY-ST-ZIP **2304 MINNEOLA ROAD**
CLEARWATER FL 33764

TITLE **V/D** ☒ Change ☐ Addition
 NAME **1ST VICE PRESIDENT**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **P/D** ☒ Change ☐ Addition
 NAME **PRESIDENT**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **S/D** ☒ Change ☐ Addition
 NAME **SECRETARY**
 STREET ADDRESS **TRUDY YATES**
 CITY-ST-ZIP **3022 HIDDEN HILLS DRIVE**
PALM HARBOR FL 34683

TITLE **V/D** ☒ Change ☐ Addition
 NAME **3RD VICE PRESIDENT**
 STREET ADDRESS **HELEN WILCOX**
 CITY-ST-ZIP **927 TALLOWOOD DRIVE**
LARGO FL 33770

TITLE **T/D** ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I 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 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: **SUE MEIER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/6/01 727-726-6410

Date Daytime Phone #

CR2E037 (10/00)