## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 749165** 

FILED Feb 10, 2010 Secretary of State

Entity Name: CRAWFORDVILLE WOMAN'S CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

64 OCHLOCKONEE ST CRAWFORDVILLE, FL 32327

Current Mailing Address: New Mailing Address:

P.O. BOX 682 CRAWFORDVILLE, FL 32326

FEI Number: 59-6138994 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BURKE, ELNITA W P/D HALLOWELL, KATHY W P/D #6 NINE GABLES LANE 38 MYSTERIOUS WATERS RD CRAWFORDVILLE, FL 32327 US CRAWFORDVILLE, FL 32327 US

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: KATHY HALLOWELL 02/10/2010

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: VSD

 Name:
 BURKE, ELNITA W

 Address:
 #6 NINE GABLES LANE

 City-St-Zip:
 CRAWFORDVILLE, FL 32327

Title: TD

Name: DAVIS, PAMELS S

Address: PO BOX

City-St-Zip: CRAWFORDVILLE, FL 32326

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: PAMELA S DAVIS TD 02/10/2010