723177

(Re	equestor's Name)	
(Ad	ddress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nar	me)
(Document Number)		
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SECRETARY OF STATE

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COVER LETTER

TO:	FO: Amendment Section Division of Corporations			
SUBJ	GFWC Clearwater Community			
	Name of Co	orporation		
DOCU	JMENT NUMBER: 723177			
The er	nclosed Statement of Change of Registered Offic	e/Agent and fee are submitted for filing.		
Please	return all correspondence concerning this matter	r to the following:		
	Susan Luce			
Name of Contact Person				
	GFWC CCWC			
Firm/Company				
	11 San Marco St.#	⁴ 606		
	Add	ress		
Clearwater, FL 33767				
City/State and Zip Code				
skluce@gmail.com				
E-mail address: (to be used for future annual report notification)				
	,	•		
For fu	rther information concerning this matter, please of	call:		
Su	san Luce	at (318) 458-5646 Area Code & Daytime Telephone Number		
	Name of Contact Person	Area Code & Daytime Telephone Number		
Enclos	sed is a \$35.00 check made payable to the Depart	ement of State.		
	Mailing Address:	Street Address:		
	Amendment Section	Amendment Section		
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle		
	. , . P	Tallahassee, FL 32301		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

•	sions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
	submitted for a corporation organized under the laws of the State of Florida
	hange its registered office or registered agent, or both, in the State of Florida.
1. The name of the cor	rporation: GFWC - Clearwater Community Waman's Club address: 3235 San Mateo Street
Clearwater, F	
	s (if different): P. O. Box 6074 FL 33758-6074
	
4. Date of incorporation	on/qualification: April 14, 1972 Document number: 723177
	t address of the current registered agent and registered office on file with the of State: (If resigned, enter resigned)
Mar	rie Grein
229	0 Terrace Dr. N.
Clea	arwater, FL 33765
6. The name and street (if changed):	t address of the new registered agent (if changed) and /or registered office
Sus	san K. Luce
11 3	San Marco St., #606
	P.O. Box NOT acceptable
Clea	arwater, FL 33767
The street address of as changed will be ide	its registered office and the street address of the business office of its registered agent, entical.
Such change was authauthorized by the boa	norized by resolution duly adopted by its board of directors or by an officer so rd, or the corporation has been notified in writing of the change.
Rosalie H. Signature of an	Article and Rosalie G. Murray 15t. Vice President
I hereby accept the ap I further agree to com performance of my du agent. Or, if this doc hereby confirm that the	ppointment as registered agent and agree to act in this capacity. Apply with the provisions of all statutes relative to the proper and complete Aties, and I am familiar with and accept the obligation of my position as registered Aties, and I am familiar with and accept the obligation of my position as registered Aties, and I am familiar with and accept the obligation of my position as registered Aties and I am familiar with a second of the corporation has been notified in writing of this change.
Suparut Signature o	Suce 8/1/17 If Registered Agent Date
If signing on behalf o	f an entity:
CFWC (I	earwater Community Printed Name "S Club "** FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)