

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 710972

**Entity Name:** COMMUNITY WOMAN'S CLUB, INC.

**Current Principal Place of Business:**

5 ROSA L. JONES DRIVE  
COCOA, FL 32922

**FILED**  
**Apr 11, 2014**  
**Secretary of State**  
**CC0755143803**

**Current Mailing Address:**

P.O. BOX 1043  
COCOA, FL 32923

**FEI Number: 59-6158814**

**Certificate of Status Desired: No**

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

SULLIVAN, LEA A  
5300 CITRUS BLVD  
COCOA, FL 32926 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            PRES  
Name            POPE, CAROLE C  
Address        P.O. BOX 1043  
City-State-Zip: COCOA FL 32923

Title            VP  
Name            CROCKETT, MARGARET  
Address        P.O. BOX 1043  
City-State-Zip: COCOA FL 32923

Title            VP  
Name            MCAFEE, DARTHY  
Address        P.O. BOX 1043  
City-State-Zip: COCOA FL 32923

Title            SEC  
Name            HATFIELD, SUSAN  
Address        P.O. BOX 1043  
City-State-Zip: COCOA FL 32923

Title            TRES  
Name            BENNIT, SUZANNE  
Address        P.O. BOX 1043  
City-State-Zip: COCOA FL 32923

*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: CAROLE POPE**

**PRES**

**04/11/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date