

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 723177

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

**FILED**  
**Feb 15, 2018**  
**Secretary of State**  
**CC2935085140**

**Current Principal Place of Business:**

11 SAN MARCO ST.  
# 606  
CLEARWATER, FL 33767

**Current Mailing Address:**

PO BOX 6074  
CLEARWATER, FL 33758-6074 US

**FEI Number: 23-7241338**

**Certificate of Status Desired: Yes**

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

LUCE, SUSAN K  
11 SAN MARCO ST #606  
CLEARWATER, FL 33767 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           PRESIDENT  
Name           ESTOCK, KAY  
Address        297 TALL OAK TRAIL  
City-State-Zip: TARPON SPRINGS FL 34688

Title           SECRETARY  
Name           DALTON, PAT  
Address        1499 EXCALIBER DR  
City-State-Zip: CLEARWATER FL 33764

Title           2VP  
Name           CLAUDIA, ARCAVASIO  
Address        1729 BRENTWOOD DR.  
City-State-Zip: CLEARWATER FL 33756

Title           3VP  
Name           KELLER, ROSEMARY  
Address        1582 GULF BLVD  
                  #1507  
City-State-Zip: CLEARWATER FL 33767

Title           1VP  
Name           MURRAY, ROSALIE  
Address        1451 STEWART BLVD  
City-State-Zip: CLEARWATER FL 33764

Title           TREASURER  
Name           LUCE, SUSAN K  
Address        11 SAN MARCO ST.  
                  #606  
City-State-Zip: CLEARWATER FL 33767

Title           CORRESPONDING SECRETARY  
Name           BAKER, JILL  
Address        1100 S. BELCHER RD  
                  #468  
City-State-Zip: LARGO FL 33771

*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: SUSAN K. LUCE**

**TREASURER**

**02/15/2018**

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

\_\_\_\_\_  
Date