

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749165

Entity Name: CRAWFORDVILLE WOMAN'S CLUB, INC.

Current Principal Place of Business:

64 OCHLOCKONEE ST
CRAWFORDVILLE, FL 32327

Current Mailing Address:

P.O. BOX 682
CRAWFORDVILLE, FL 32326

FEI Number: 59-6138994

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PATE, BETTY JO P/D
271 BOB MILLER RD
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: BETTY JO PATE

01/06/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VSD
Name BURKE, NITA
Address 31 TUSCANY TRACE
City-State-Zip: CRAWFORDVILLE FL 32327

Title TD
Name DAVIS, PAMELA S
Address PO BOX 1492
City-State-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

01/06/2014

Electronic Signature of Signing Officer/Director Detail

Date