

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

DOCUMENT# N96000006362

**Entity Name:** WOMAN'S CLUB OF OLDSMAR, INC.

**Current Principal Place of Business:**

207 EXETER ST  
OLDSMAR, FL 34677

**Current Mailing Address:**

207 EXETER ST  
P.O. BOX 942  
OLDSMAR, FL 34677 US

**FEI Number:** 59-1691385

**Certificate of Status Desired:** No

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

ROGERS, ORCHID S. MRS.  
212 E. ARLINGTON AVE.  
OLDSMAR, FL 34677 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:** ORCHID S. ROGERS

02/28/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name ROGERS, ORCHID SMRS.  
Address 212 E. ARLINGTON AVE. - P. O. BOX  
867  
City-State-Zip: OLDSMAR FL 34677

Title T  
Name BURNS, CHRISTY MRS  
Address 507 BAYVIEW BLVD.  
City-State-Zip: OLDSMAR FL 34677

Title S  
Name MILLER, JANICE  
Address 309 EXETER ST.  
City-State-Zip: OLDSMAR FL 34677

Title VP  
Name JANE, BOHR MRS.  
Address 505 OAKLEAF BLVD.  
City-State-Zip: OLDSMAR FL 34677

*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:** ORCHID S. ROGERS

PRESIDENT

02/28/2014

Electronic Signature of Signing Officer/Director Detail

Date