

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 05, 2007 08:00 AM
Secretary of State

DOCUMENT # 700372 1. Entity Name GFWC JUNIOR WOMAN'S CLUB OF PALATKA, INC.		
Principal Place of Business % JOHN ROWE 906 SOUTH STATE ROAD 19 PALATKA, FL 32177 US	Mailing Address % JOHN ROWE 906 SOUTH STATE ROAD 19 PALATKA, FL 32177 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent ROWE, JOHN D 108 SUNSET POINT PALATKA, FL 32177		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE: _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BELLAMY, CHRISTI 2016 LOCUST PALATKA, FL 32177	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT HARE, VICKI 7043-2 SILVER LAKE DR PALATKA, FL 32177	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COYLE, JANICE 111 SKEET CLUB RD PALATKA, FL 32177	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROWE, SHEILA 108 SUNSET POINT PALATKA, FL 32177	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARRINGTON, RITA 310 ST JOHNS AVE PALATKA, FL 32177	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes; I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Christi Bellamy</u> 2/2/07 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		



02022007 No Chg-NP CR2E037 (4/06)

4. FEI Number 51-0209964	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

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02/12/07-80031-012 61.25

**DO NOT WRITE
IN THIS SPACE**