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1996 MAY -1 PM 4:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



NONPROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **701085** (3)

1. Corporation Name

THE GAINESVILLE WOMAN'S CLUB, INC.

Principal Place of Business

Mailing Address

**2809 WEST UNIVERSITY AVE.
GAINESVILLE FL 32607**

**2809 WEST UNIVERSITY AVE.
GAINESVILLE FL 32607**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

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30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

06/16/1960

3a. Date of Last Report

04/17/1995

4. FEI Number

59-0799924

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

**LITTLE, ROLAINE
2904 NE 12 ST
GAINESVILLE FL 32609**

81 Name **Rolaine H. Little**

82 Street Address (P.O. Box Number is Not Acceptable)

83 **2904 N. E. 12th Street**

84 City **Gainesville**

85 Zip Code

32609

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

D

Little, Rolaine

**2904 N. E. 12th Street
Gainesville, FL 32609**

TD

MacDonald, Sarah

**1834 N. E. 8th Street
Gainesville, FL 32609**

VP

**SHEPARD, NAOMI
4200 N. W. 77th Terrace
Gainesville, FL 32606**

PD

**Brown, Sarah
7915 S.W. 42nd Terrace
Gainesville, FL 32608**

VP

**Ward, Geraldine
1921 N. W. 23rd Street
Gainesville, FL 32605**

VP

**Whitney, Pat
2016 N. W. 18th Lane
Gainesville, FL 32605**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Rolaine Little* **ROLAINE LITTLE**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 30, 1996

(352) 372-2112

Date

Daytime Phone #

CR2E037 (12/95)