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Feb 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 701085 (3)

1. Corporation Name
THE GAINESVILLE WOMAN'S CLUB, INC.

Principal Place of Business	Mailing Address
2609 WEST UNIVERSITY AVE. GAINESVILLE FL 32607	2609 WEST UNIVERSITY AVE. GAINESVILLE FL 32607

3. Date Incorporated or Qualified: 06/16/1960

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

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

LITTLE, ROLAINE H
2904 N.E. 12TH STREET
GAINESVILLE FL 32609

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	LITTLE, ROLAINE		1.2 NAME		
STREET ADDRESS	2904 N.E. 12TH STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL 32609		1.4 CITY-ST-ZIP		
TITLE	TD	☐ DELETE	2.1 TITLE	TD	X ☐ Change ☐ Addition
NAME	MACDONALD, SARAH		2.2 NAME	Lois Reed-Hill	
STREET ADDRESS	1834 N.E. 8TH STREET		2.3 STREET ADDRESS	11100 NW 11 Avenue	
CITY-ST-ZIP	GAINESVILLE FL 32609		2.4 CITY-ST-ZIP	Gainesville, FL 32606	
TITLE	VP	☐ DELETE	3.1 TITLE	VP	☒ Change ☐ Addition
NAME	SHEPARD, NAOMI		3.2 NAME	Miriam Kimball	
STREET ADDRESS	4200 N.W. 77TH TERRACE		3.3 STREET ADDRESS	Rt 1 Box: 460	
CITY-ST-ZIP	GAINESVILLE FL 32606		3.4 CITY-ST-ZIP	Micanony, FL32667	
TITLE	PD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	BROWN, SARAH		4.2 NAME		
STREET ADDRESS	7915 S.W. 42ND TERRACE		4.3 STREET ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL 32608		4.4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	5.1 TITLE	VP	X ☐ Change ☐ Addition
NAME	WARD, GERALDINE		5.2 NAME	Majorie Evans	
STREET ADDRESS	1921 N.W. 23RD STREET		5.3 STREET ADDRESS	9426 NW 27 Place	
CITY-ST-ZIP	GAINESVILLE FL 32605		5.4 CITY-ST-ZIP	Gainesville, FL 32606	
TITLE	VP	☐ DELETE	6.1 TITLE	VP	☒ Change ☐ Addition
NAME	WHITNEY, PAT		6.2 NAME	Betty Consbruck	
STREET ADDRESS	2016 N.W. 18TH LANE		6.3 STREET ADDRESS	4826 NW 18 Place	
CITY-ST-ZIP	GAINESVILLE FL 32605		6.4 CITY-ST-ZIP	Gainesville, FL 32605	

CR2E037 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Lois Reed-Hill Lois Reed-Hill Treasurer 4/26/98