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Apr 13 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 # 703666 (8)

1. Corporation Name
GFWC ORLANDO JUNIOR WOMAN'S CLUB, INC.

Principal Place of Business	Mailing Address
PHILANTHROPIC FUND INC 992 STONEWOOD LANE MAITLAND FL 32751	P.O. BOX 560251 ORLANDO FL 32856 US

3. Date Incorporated or Qualified: 03/02/1962

4. FEI Number: NOT APPLICABLE ☐ 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
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

MUROWSKI, MICHELLE M
3815 LAGUNA DRIVE
ORLANDO FL 32805

10. Name and Address of New Registered Agent

81 Name: MICHELLE M. MUROSKI
82 Street Address (P.O. Box Number is Not Acceptable): 4924 HOOK HOLLOW CIRCLE
83
84 City: ORLANDO FL 85 Zip Code: 32837

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: Michelle M. Muroski 4/5/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE	PD	☑ Change ☐ Addition
NAME	SMITH, KYM		1.2 NAME	SMITH, KYM	
STREET ADDRESS	2710 E. GORE STREET		1.3 STREET ADDRESS	1026 MONTCALM ST	
CITY-ST-ZIP	ORLANDO FL 32806		1.4 CITY-ST-ZIP	ORLANDO, FL 32806	
TITLE	VPD	☐ DELETE	2.1 TITLE	VPD	☒ Change ☐ Addition
NAME	WRIGHT, BETH		2.2 NAME	WRIGHT, BETH	
STREET ADDRESS	604 JAMESTOWN DR APT E		2.3 STREET ADDRESS	370 LAKE ONTARIO COURT #2201	
CITY-ST-ZIP	ORLANDO FL 32828		2.4 CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 32701	
TITLE	TD	☐ DELETE	3.1 TITLE	TD	☑ Change ☐ Addition
NAME	MUROWSKI, MICHELLE M		3.2 NAME	MUROSKI, MICHELLE M.	
STREET ADDRESS	3815 LAGUNA DRIVE		3.3 STREET ADDRESS	4924 HOOK HOLLOW CR.	
CITY-ST-ZIP	ORLANDO FL 32805		3.4 CITY-ST-ZIP	ORLANDO, FL 32837	
TITLE	AT	☐ DELETE	4.1 TITLE	ATD	☑ Change ☐ Addition
NAME	NIELSEN, BEVERLY		4.2 NAME	NIELSEN, BEVERLY	
STREET ADDRESS	627 MAYFAIR DRIVE		4.3 STREET ADDRESS	239 DEMPSEY WAY	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 32701		4.4 CITY-ST-ZIP	ORLANDO, FL 32835	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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: Michelle M. Muroski 4/5/98