## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 703666** 

FILED Apr 28, 2005 Secretary of State

Entity Name: GFWC ORLANDO JUNIOR WOMAN'S CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

621 WILKS AVENUE ORLANDO, FL 32809

Current Mailing Address: New Mailing Address:

PO BOX 560554

ORLANDO, FL 32856 US

FEI Number: 59-6135528 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BLACKERBY, MARY L
535 MARY JESS RD
5013 TOULON DRIVE
ORLANDO, FL 32839 US
5013 TOULON DRIVE
ORLANDO, FL 32839 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: TARA C. BORELL 04/28/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

 Name:
 CHAPMAN, LISA
 Name:
 BORELL, TARA C

 Address:
 370 LAKE TAHOE CIRCLE #303
 Address:
 5013 TOULON DRIVE

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32701
 City-St-Zip:
 ORLANDO, FL 32839

Address: 5327 HAWFORD CIRCLE Address: 1105 APPLETON AVENUE
City-St-Zip: ORLANDO, FL 32812 City-St-Zip: ORLANDO, FL 32806

 $\label{eq:title:Title:TR} \mbox{Title:} \mbox{ TR} \mbox{ () Delete} \mbox{ Title:} \mbox{ TR} \mbox{ (X) Change () Addition}$ 

 Name:
 BLACKERBY, MARY L
 Name:
 CARVAJAL, ROBIN

 Address:
 535 MARY JESS RD.
 Address:
 15144 THOROUGHBRED LANE

 City-St-Zip:
 ORLANDO, FL 32839
 City-St-Zip:
 MONTVERDE, FL 34756

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TARA C. BORELL PD 04/28/2005