2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 703666

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

FILED Apr 29, 2003 Secretary of State

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:

COFFIN, E. ANNIE

4730 SADDLE CREEK PLACE

ORLANDO, FL 32829 US

BLACKERBY, MARY L

535 MARY JESS RD

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: MARY L. BLACKERBY 04/29/2003

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 GARVEY, DEBBIE
 Name:
 CHAPMAN, LISA

 Address:
 2117 WHITFIELD LANE
 Address:
 370 LAKE TAHOE CIRCLE #303

Address: 2117 WHITFIELD LANE Address: 370 LAKE TAHOE CIRCLE #303 City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ALTAMONTE SPRINGS, FL 32701

 Name:
 CHAPMAN, LISA
 Name:
 BLAKE, CHRISTI

 Address:
 370 LAKE TAHOE CIRCLE, #303
 Address:
 5327 HAWFORD CIRCLE

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32701
 City-St-Zip:
 ORLANDO, FL 32812

 $\label{eq:title:Title:Title:TR} \textit{Title:} \qquad \textit{TR} \qquad \textit{(X) Change () Addition}$

 Name:
 COFFIN, E. ANNIE
 Name:
 BLACKERBY, MARY L

 Address:
 4730 SADDLE CREEK PLACE
 Address:
 535 MARY JESS RD.

 City-St-Zip:
 ORLANDO, FL 32829
 City-St-Zip:
 ORLANDO, FL 32839

Title: TD (X) Delete Title: () Change () Addition

 Name:
 BLACKERBY, LEA
 Name:

 Address:
 535 MARY JESS ROAD
 Address:

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

Title: S (X) Delete Title: () Change () Addition

 Name:
 EFFRON, RHONDA
 Name:

 Address:
 5106 LEEWARD WAY
 Address:

 City-St-Zip:
 ORLANDO, FL 32809
 City-St-Zip:

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: M. LEA BLACKERBY TR 04/29/2003