

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 16, 2004 8:00 am**  
**Secretary of State**

03-16-2004 90035 011 \*\*\*\*61.25

**DOCUMENT # 705738**

1. Entity Name

GFWC WOMAN'S CLUB OF LEESBURG, INC.



Principal Place of Business

700 S 9TH STREET  
LEESBURG FL 34748

Mailing Address

PO BOX 490532  
LEESBURG FL 34749-0532

34050140



MOORE CR2E037 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-1481485

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

~~BOOTHE, JANE R~~  
~~208 N VALLEY RD~~  
~~FRUITLAND PARK FL 34731~~

7. Name and Address of New Registered Agent

Name Juanita S. Hall  
Street Address (P.O. Box Number is Not Acceptable)  
1610 Michigan Ave.  
Leesburg  
City FL Zip Code 34748

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Juanita S. Hall

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

Juanita S. Hall Treasurer

(NOTE: Registered Agent signature required when reinstating)

DATE 3-11-04

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME DAVISON, MARGARET  
STREET ADDRESS 1611 SLAKEVIEW AVE  
CITY-ST-ZIP LEESBURG FL 34748 ☒ Delete

TITLE TD  
NAME STEVENS, PATRICIA  
STREET ADDRESS 35012 HAINES CREEK RD  
CITY-ST-ZIP LEESBURG FL 34788 ☒ Delete

TITLE SD  
NAME IRWIN, WALLY  
STREET ADDRESS 23 RHETT RD  
CITY-ST-ZIP LEESBURG FL 34788 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME Rew, Ethel  
STREET ADDRESS 25304 Hibiscus St  
CITY-ST-ZIP Leesburg FL 34748 ☒ Change ☐ Addition

TITLE TR  
NAME Hall, Juanita S.  
STREET ADDRESS 1610 Michigan Ave.  
CITY-ST-ZIP Leesburg FL 34748 ☒ Change ☐ Addition

TITLE SP  
NAME Jordan, Betsy  
STREET ADDRESS 5432 Astor St.  
CITY-ST-ZIP Leesburg FL 34748 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Juanita S. Hall - Juanita S. Hall

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/11/04 352-787-4473

Date

Daytime Phone #