

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708550

FILED
Jan 10, 2010
Secretary of State

Entity Name: CLERMONT WOMAN'S CLUB, INC.

Current Principal Place of Business:

655 WEST BROOME STREET
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 120532
CLERMONT, FL 347120532 US

New Mailing Address:

FEI Number: 59-6144304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILWEE, DEBORAH J
16215 DOUGLAS RD
GROVELAND, FL 34736 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: WELLS, MARY J
Address: 2015 CRESTRIDGE DR.
City-St-Zip: CLERMONT, FL 34711

Title: VP
Name: SCHLAZER, BASHA
Address: 3621 FAIRFIELD DR.
City-St-Zip: CLERMONT, FL 34711

Title: VP
Name: EMORY, OLLIE J
Address: 1595 MISTY GLEN LANE
City-St-Zip: CLERMONT, FL 34711

Title: RS
Name: COLETTE, NOELLA
Address: 1330 4TH STREET
City-St-Zip: CLERMONT, FL 34711

Title: CSD
Name: FINK, ELEANOR
Address: 3850 BEACON RIDGE WAY
City-St-Zip: CLERMONT, FL 34711

Title: T
Name: MILWEE, DEBORAH J
Address: 16215 DOUGLAS RD.
City-St-Zip: GROVELAND, FL 34736

I hereby 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 all other like empowered.

SIGNATURE: DEBORAH J. MILWEE

T

01/10/2010

Electronic Signature of Signing Officer or Director

Date