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FILED

Mar 05 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 711442 (4)

1. Corporation Name

GFWC CHARLOTTE COUNTY JUNIORS, INC.

Principal Place of Business

Mailing Address

P.O. BOX 2842
PORT CHARLOTTE FL 33949 2842P.O. BOX 2842
PORT CHARLOTTE FL 33949 28423. Date Incorporated or Qualified
09/06/19663a. Date of Last Report
08/05/1996

4. FEI Number

71-4421806

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MOODY, SHERRIE M
1286 PRESQUE ISLE DR.
PORT CHARLOTTE FL 33952

81 Name

Denise A Moraris

82 Street Address (P.O. Box Number is Not Acceptable)

806 Ellicott Cir

83

84 City

Port Charlotte

FL

85 Zip Code
33952

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

Denise A Moraris

2/24/97

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 SD ☐ DELETE
NAME THORNBURGH, SANDRA
STREET ADDRESS 1307 ONYX ST
CITY - ST - ZIP PORT CHARLOTTE FL 339801.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIPTITLE VD ☒ DELETE
NAME MARRYOTT, MARY
STREET ADDRESS 4291 ROCK CREEK CIR.
CITY - ST - ZIP PT. CHARLOTTE FL 339482.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIPTITLE VD ☒ DELETE
NAME MORARIS, DENISE
STREET ADDRESS 806 ELLICOTT CIRCLE
CITY - ST - ZIP PORT CHARLOTTE FL 339523.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIPTITLE VD ☐ DELETE
NAME Susan Powers
STREET ADDRESS 1307 Onyx Street
CITY - ST - ZIP Punta Gorda FL 339804.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIPTITLE TD ☐ DELETE
NAME Brenda Butwell
STREET ADDRESS 5415 Grovewood Cir
CITY - ST - ZIP Punta Gorda FL 339805.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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:

Denise A Moraris

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0067497

CR2E037 (9/96)