

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 711635

**FILED**  
**May 02, 2011**  
**Secretary of State**

**Entity Name:** GFWC SOUTHSIDE WOMAN'S CLUB OF JACKSONVILLE, INC.

**Current Principal Place of Business:**

2560 CLUB TERRACE  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

2560 CLUB TERRACE  
JACKSONVILLE, FL 32207

**New Mailing Address:**

**FEI Number:** 59-0817788

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUSHOR, PATRICIA D MRS.  
9941 WATSON DRIVE WEST  
JACKSONVILLE, FL 32217 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: IV  
Name: FRANKENBERG, HELEN  
Address: 2560 CLUB TERRACE  
City-St-Zip: JACKSONVILLE, FL 32207

Title: P  
Name: BUSHOR, PATRICIA D  
Address: 2560 CLUB TERRACE  
City-St-Zip: JACKSONVILLE, FL 32207

Title: T  
Name: SNELL, BETTY JO  
Address: 2560 CLUB TERRACE  
City-St-Zip: JACKSONVILLE, FL 32207

Title: 2VP  
Name: LUCHTMAN, DELORE  
Address: 2560 CLUB TERRACE  
City-St-Zip: JACKSONVILLE, FL 32207

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: PATRICIA BUSHOR

PRES

05/02/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date