2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 06, 2001 8:00 am
Secretary of State
04-06-2001 90021 004 ****61.25

DOCUMENT # 712719

1. Entity Name

WOMAN'S CLUB OF WELAKA, INC.

Principal Place of Business	Mailing Address
HWY 309 WELAKA FL 32193 US	HWY 309 WELAKA FL 32193 US

000031697

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc. P.O. Box 154
City & State	City & State WELAKA FL
Zip / Country	Zip 32193 / Country PUTNAM

4. FEI Number 59-6205648 ☐ Applied For ☑ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COKINS, NORMA 239 BLUFF ROAD #213 SATSUMA FL 32189	Name ELLEN COPPEDGE Street Address (P.O. Box Number is Not Acceptable) 801 FRONT St. City WELAKA FL Zip Code 32193

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.

SIGNATURE ELLEN COPPEDGE, TREASURER Ellen Coppedge 3/15/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD JOYCE DEPRE 123 ANDERSON DR POMONA PARK FL 32181	☒ Delete	P PATRICIA BRYANT 1261 CR 309 GEORGETOWN, FL 32139	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP CLARA MALOY 430 PLANTATION PINES DR GEORGETOWN FL 32193	☒ Delete	VD JOANN HUGHES 272 RIVERBEND PLACE WELAKA, FL 32193	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP SCHULMISTER, MARIE H C 2 BOX 316 (202 S HAYES) CRESCENT CITY FL 32112	☒ Delete	VD GINGER HUBERT 1074 FRONT ST. WELAKA FL 32193	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TVP ANDERSON, ROSE MARY PO BOX 1343 WELAKA FL 32193	☒ Delete	VD ELIZABETH LEWIS 123 RIVERBEND PLACE WELAKA, FL 32193	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT COKINS, NORMA 239 BUFFALO BLUFF RD, #213 SATSUMA FL 32189	☒ Delete	S LILA TAYLOR 37 SCOTT ST. WELAKA FL 32193	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	T ELLEN COPPEDGE 801 FRONT ST. WELAKA FL 32193	☒ Change ☐ Addition

CR2E037 (10/00)

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: Ellen Coppedge ELLEN Coppedge, T. 3/15/01 9044678818
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #