2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#716344

Mar 27, 2009 Secretary of State

Entity Name: WOMEN'S CHAMBER OF COMMERCE OF THE GREATER GULF BEACHES, INC.

Current Principal Place of Business: New Principal Place of Business:

7128 SO. SHORE DR., SO. S. PASADENA, FL 33707

Current Mailing Address: New Mailing Address:

P.O. BOX 47402

ST. PETERSBURG, FL 33743

FEI Number: 59-6189461 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FREDERICH, NANCY F 14381 MARK DR. LARGO, FL 33774 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

DILWORTH, JOANNE Name: SZEMER, RUTH Name:

7300 SUN ISLAND DRIVE #1401 Address: 6472 FAIRWAY VIEW BLVD Address: City-St-Zip: SO. PASADENA, FL 33707 City-St-Zip: ST. PETERSBURG, FL 33707

Title: VD () Delete Title: () Change () Addition

NOLAN, ANNIE Name: Name: Address: 11696 PARKVIEW LANE Address: City-St-Zip: SEMINOLE, FL 33772 City-St-Zip:

Title: () Delete Title: () Change () Addition

FRULAND, JUNE Name: Name: 7128 S. SHORE DR., S Address: Address: City-St-Zip: S. PASADENA, FL 33707 City-St-Zip:

(X) Change () Addition Title: PD () Delete Title: PD

Name: GASTON, WANDA Name: MINNING, DENA 14 ISLAND DRIVE Address: 4318 4TH AVE., NO. Address:

City-St-Zip: SAINT PETERSBURG, FL 33713 City-St-Zip: TREASURE ISLAND, FL 33706

Title: () Delete Title: (X) Change () Addition

LEVITTINO, DEBBIE KANE, LOUISE Name: Name:

10207 2ND STREET, EAST 11682 OAKRIDGE AVE Address: Address: City-St-Zip: TREASURE ISLAND, FL 33706 City-St-Zip: SEMINOLE, FL 33772

Title: () Delete Title: () Change () Addition

KANE, LOUISE F Name: Name: Address: 11682 OAKRIDGE AVE Address: SEMINOLE, FL 33772 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RUTH SZEMER Ρ 03/27/2009