

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717959

FILED
Jan 06, 2007
Secretary of State

Entity Name: GFWC GAINESVILLE JUNIOR WOMAN'S CLUB, INC.

Current Principal Place of Business:

P.O. BOX 357656
GAINESVILLE, FL 32635

New Principal Place of Business:

Current Mailing Address:

PO BOX 357656
GAINESVILLE, FL 32635

New Mailing Address:

FEI Number: 23-7253593

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EHLERS, KAREN
2105 NW 27 TERRACE
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

WALTRIP, BETH
339 NW 50TH BLVD
GAINESVILLE, FL 32607 US

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: BETH WALTRIP

01/06/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SEC () Delete
Name: MARTIN, TELISHA
Address: 4425 NW 44TH PLACE
City-St-Zip: GAINESVILLE, FL 32606

Title: PRES () Delete
Name: EHLERS, KAREN
Address: 2105 NW 27 TERRACE
City-St-Zip: GAINESVILLE, FL 32605

Title: TREA () Delete
Name: SHIPMAN, SARA JANE
Address: 26041501 RIKER HALL
City-St-Zip: GAINESVILLE, FL 32612

Title: 1VP () Delete
Name: WAGSTAFF, JILL
Address: 1415 NE 7TH STREET
City-St-Zip: GAINESVILLE, FL 32601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SEC (X) Change () Addition
Name: MORTON, ANNIE
Address: 4700 SW ARCHER RD #H64
City-St-Zip: GAINESVILLE, FL 32608

Title: PRES (X) Change () Addition
Name: WALTRIP, BETH
Address: 339 NW 50TH BLVD
City-St-Zip: GAINESVILLE, FL 32607

Title: TREA (X) Change () Addition
Name: SANZ, SAMMI
Address: 420 SW 83RD TERR
City-St-Zip: GAINESVILLE, FL 32607

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SAMMI SANZ

TREA

01/06/2007

Electronic Signature of Signing Officer or Director

Date