

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2005 8:00 am**  
**Secretary of State**

05-03-2005 90133 039 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                          |                                                                                                                     |                                                              |                                                                                                                                                                                                               |                                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <b>DOCUMENT # 723177</b><br>1. Entity Name<br><b>GFWC-CLEARWATER COMMUNITY WOMAN'S CLUB, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                          |                                                                                                                     |                                                              |                                                                                                                              |                                                                              |
| Principal Place of Business<br><b>2405 FRANCISCAN DR #49<br/>CLEARWATER, FL 33763 US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                          |                                                                                                                     |                                                              | Mailing Address<br><b>PO BOX 6074<br/>CLEARWATER, FL 33758-6074 US</b>                                                                                                                                        |                                                                              |
| 2. Principal Place of Business<br><b>1863 OAKDALE LN N</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                          | 3. Mailing Address<br>                                                                                              |                                                              |                                                                                                                             |                                                                              |
| Suite, Apt. #, etc.<br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                          | Suite, Apt. #, etc.<br>                                                                                             |                                                              | 04212005 Chg-NP CR2E037 (10/03)                                                                                                                                                                               |                                                                              |
| City & State<br><b>CLEARWATER, FL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                          | City & State<br>                                                                                                    |                                                              | 4. FEI Number<br><b>23-7241338</b>                                                                                                                                                                            |                                                                              |
| Zip<br><b>33764</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                          | Country<br><b>USA</b>                                                                                               |                                                              | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required                                                                                                               |                                                                              |
| 6. Name and Address of Current Registered Agent<br><b>YATES, TRUDY J<br/>5244 SWALLOW DRIVE<br/>NEW PORT RICHEY, FL 34652</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                          |                                                                                                                     |                                                              | 7. Name and Address of New Registered Agent<br>Name <b>Marie Grein</b><br>Street Address (P.O. Box Number is Not Acceptable)<br><b>2290 Terrace Dr. N.</b><br>City <b>Clearwater</b> FL Zip Code <b>33765</b> |                                                                              |
| 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. I am familiar with, and accept the obligations of registered agent.<br>SIGNATURE <u><i>Marie Grein</i></u> DATE <u>4/25/05</u><br><small>Signature, typed or printed name of registered agent and the applicable (NOTE: Registered Agent signature required when restoring)</small>                                                                                                                                                                                                      |                                                                          |                                                                                                                     |                                                              |                                                                                                                                                                                                               |                                                                              |
| <b>Filing Fee is \$61.25<br/>Due by May 1, 2005</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                          | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees |                                                              | <b>Make check payable to<br/>Florida Department of State</b>                                                                                                                                                  |                                                                              |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                          |                                                                                                                     | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b> |                                                                                                                                                                                                               |                                                                              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | SP<br>BRYDER, ELLIE<br>58 PELICAN PL #58<br>CLEARWATER, FL 33756         | <input checked="" type="checkbox"/> Delete                                                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP           | S.D<br>Betsy Dont<br>304 Bamboo Lane<br>Largo, FL 33770                                                                                                                                                       | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | PD<br>JENSEN, GEORGIA<br>2405 FRANCISCAN DR #49<br>CLEARWATER, FL 33763  | <input checked="" type="checkbox"/> Delete                                                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP           | 2VP<br>Lynn McLaren<br>2379 Glenmoor Rd N<br>Clearwater, FL 33764                                                                                                                                             | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 2VPD<br>ROBBINS, MARY JANE<br>11690 PARKVIEW LN<br>SEMINOLE, FL 33772    | <input checked="" type="checkbox"/> Delete                                                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP           | 3VP<br>Esther Miseroy<br>3540 Countrybrook Ln #D11<br>Palm Harbor, FL 34684                                                                                                                                   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 1VP<br>LEE, ELLIE<br>1863 OAKDALE LN N<br>CLEARWATER, FL 33764           | <input type="checkbox"/> Delete                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP           | P.D<br>                                                                                                                                                                                                       | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 3VPD<br>CRUM, ANN<br>3677 SHORE BLVD (P.O. BOX 342)<br>OLDSMAR, FL 34677 | <input checked="" type="checkbox"/> Delete                                                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP           | 1VPD<br>Judith Lutz<br>1312 Moreland Dr.<br>Clearwater, FL 33764                                                                                                                                              | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | TD<br>YATES, TRUDY<br>5244 SWALLOW DR<br>NEW PORT RICHEY, FL 34652       | <input checked="" type="checkbox"/> Delete                                                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP           | T<br>Marie Grein<br>2290 Terrace Dr. N.<br>Clearwater, FL 33765                                                                                                                                               | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 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. |                                                                          |                                                                                                                     |                                                              |                                                                                                                                                                                                               |                                                                              |
| <b>SIGNATURE:</b> <u><i>Eleanore H. Lee</i></u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                          |                                                                                                                     | <u>4/25/05</u><br><small>Date</small>                        |                                                                                                                                                                                                               | <u>727-536-9706</u><br><small>Daytime Phone #</small>                        |