2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#732348

FILED Sep 11, 2007 Secretary of State

Entity Name: GENERAL FEDERATION OF WOMEN'S CLUBS (GFWC) SEMINOLE JUNIOR WOMAN'S CLUB

INCORPORATED

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

12138 98TH AVENUE NORTH 9460 94TH STREET N

P.O. BOX 4524 SEMINOLE, FL 33772 US

SEMINOLE, FL 33772 US

Current Mailing Address: New Mailing Address:

12138 98TH AVENUE NORTH P O BOX 4524

P.O. BOX 4524 SEMINOLE, FL 33772 US

SEMINOLE, FL 33772 US

FEI Number: 59-6155076 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

DANIEL, LESI S

COLLINS, PATRICIA A

14394 86TH AVENUE NORTH

SEMINOLE, FL 33776 US

COLLINS, PATRICIA A

9460 94TH STREET N

LARGO, FL 33777 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: PATRICIA COLLINS 09/11/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 DANIEL, LESI S
 Name:
 COLLINS, PATRICIA A

 Address:
 14394 86TH AVENUE NORTH
 Address:
 9460 94TH STREET N

City-St-Zip: SEMINOLE,, FL 33776 City-St-Zip: LARGO, FL 33777

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

Name: VOGEL, CHRISTY Name: SIRICO, JULIA

 Address:
 12138 98TH AVENUE NORTH
 Address:
 8681 BARDMOOR BLVD #601

 City-St-Zip:
 SEMINOLE, FL 33776
 City-St-Zip:
 LARGO, FL 33777

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

 Name:
 WINTERS, JO
 Name:

 Address:
 9799 53RD AVENUE N.
 Address:

 City-St-Zip:
 ST. PETERSBURG, FL 33708
 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: PATRICIA COLLINS TRES 09/11/2007