2006-NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

May 01, 2006 8:00 am Secretary of State **DOCUMENT # 732823** 1. Entity Name 05-01-2006 90313 029 ****61.25 GFWC LUTZ-LAND O'LAKES WOMAN'S CLUB, INC. Principal Place of Business Mailing Address HWY 41 AND SUNSET BLVD PO BOX 656 HWY 41 AND SUNSET BLVD PO BOX 656 **LUTZ FL 33548** LUTZ FL 33548 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 4. FEI Number ___59-1696191 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HELEN FORNINO JEAN BUTCHER Street Address (P.O. Box Number is Not Acceptable) 2619 W. LUTZ LAKE FERN RD. **LUTZ FL 33558** LANE 23621 TURTLE LAKES Zip Code 33559-7350 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. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Delete TITLE Pres KTCHOLSON, BARBAKA Change ☐ Addition BENTON, CHERYL NAME 3867 LAKE JOYCE DRIVE 707 CHANCELLAR DR STREET ADDRESS STREET ADDRESS LANDO'LAKES I=L.34639-4698 CITY-ST-ZIP LUTZ FL 33548-4512 CITY-ST-7IP VP TITLE Delete TITLE ☐ Change ✓ Addition JO VANBEBBER NICHOLSON, BARBARA NAME NAME 301 DEBUEL ROAD 3867 LAKE JOYCE DR STREET ADDRESS STREET ADDRESS LUTZ,FL 33549-5400 CITY-ST-ZIP LAND O LAKES FL 34639-4698 CITY-ST-ZIP Delete Change Addition ANNIE FERNANDEZ SERIO, PAT NAME NAME 19001 APIAN WAY 10928 N. EDISON AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LUTZ FL 33558-4933 CITY-ST-ZIP TAMPA, FL 33612 TITLE Delete TITLE Change Addition WANNAMAKER, MARILYN BENTON, CHERYL NAME NAME 707 CHANCELLAR DR. STREET ADDRESS 405 LOCH DEVON DR STREET ADDRESS LUTZ, FL. 33548-4512 CITY-ST-ZIP LUTZ FL 33549-4282 CITY-ST-ZIP TITLE Delete TITLE ☐ Change X Addition SIMMONS, SHIRLEY MARY WOODWELL 2741 SHADE CREST RD 17510 LIVINGSTON AVE STREET ADDRESS STREET ADDRESS LUTZ FL 33559-5850 LANDO'LAKES FLORIOR 34639-2274 CITY-ST-7IP CITY-ST-7IP TITLE Delete TITEF Change **Addition** D C OOPER, SARA DABNEY, LORRAINE NAME NAME 19620 LAKE OSCEBIA LANE 23235 CLUB VILLAS DR STREET ADDRESS STREET ADDRESS ODESSA, FL. 33556-17 CITY-ST-ZIP LAND O LAKES FL 34639-4146 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. 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: Dahan L. Thickison

4/20/06

(813) 996-7742

FILED