


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 734442 1. Entity Name G F W C ARCADIA WOMAN'S CLUB, INC	
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Principal Place of Business 2288 N. AMERICAN LEGION WAY ARCADIA, FL 34265-0204 US	Mailing Address WEST HICKORY STREET (OLD BRADENTON RD.) P.O. BOX 204 ARCADIA, FL 34265-0204 US
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DO NOT WRITE IN THIS SPACE

FILED
Aug 13, 2008 08:00 AM
Secretary of State



07302008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2366309	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent VARNER, IRIS 2943 SE CREEKWOOD ARCADIA, FL 33821

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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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ORTON, PEGGY 2626 NE HWY 70 LOT 167 ARCADIA, FL 34266
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D VARNER, IRIS 2943 SE CREEKWOOD DR ARCADIA, FL 34266
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD ARRINGTON, MARY 1525 SE TANGELO DR ARCADIA, FL 34266
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP CARLTON, ZONA 5750 SW SMITH RD ARCADIA, FL 34265
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S WIGHT, LOIS 7419 SW OAK POINT DRIVE ARCADIA, FL 34269
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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08/13/08-80002-005 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Iris J Varner IRIS J VARNER 8-11-08 1-863
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #