

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2008 8:00 am
Secretary of State

05-05-2008 90249 014 ****61.75

DOCUMENT # 738521

1. Entity Name
GFWC CRESCENT CITY WOMAN'S CLUB, INC.



Principal Place of Business
604 N SUMMIT STREET
CRESCENT CITY, FL 32112 US

Mailing Address
604 N SUMMIT STREET
CRESCENT CITY, FL 32112



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

05012008

Chg-NP

CR2E037 (12/06)

4. FEI Number
59-2348234

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FAWLEY, DOROTHY A
205 KANSAS STREET
SATSUMA, FL 32189

Name
MYRA LORD

Street Address (P.O. Box Number is Not Acceptable)

219 N. LAKE ST.

City
CRESCENT CITY

FL

Zip Code
32112

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 Myra Lord

MYRA LORD, TREASURER

4-30-08

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 May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P
NAME GARLAND, FREIDA
STREET ADDRESS 616 OLD HWY 17
CITY-ST-ZIP CRESCENT CITY, FL 32112 ☒ Delete

TITLE 1VP
NAME TURNER, JANET
STREET ADDRESS 520 N. PARK ST
CITY-ST-ZIP CRESCENT CITY, FL 32112 ☒ Delete

TITLE 2VP
NAME EDWARDS, PATRICA
STREET ADDRESS 200 CRESCENT LANE
CITY-ST-ZIP CRESCENT CITY, FL 32112 ☒ Delete

TITLE 3VP
NAME LIVINGSTONE, MARSHA
STREET ADDRESS 140 PARK DR
CITY-ST-ZIP SATSUMA, FL 32189 ☒ Delete

TITLE RSEC
NAME LOVE-TINSETH, DOROTHY
STREET ADDRESS 518 N LAKE ST
CITY-ST-ZIP CRESCENT CITY, FL 32112 ☒ Delete

TITLE TRES
NAME FAWLEY, DOROTHY A
STREET ADDRESS 305 KANSAS STREET
CITY-ST-ZIP SATSUMA, FL 32189 ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME SUSAN BRIERLEY
STREET ADDRESS 414 PINE ST.
CITY-ST-ZIP CRESCENT CITY, FL 32112 ☐ Change ☒ Addition

TITLE 1VP
NAME TRACY MCKEOWN
STREET ADDRESS 32 N. PARK ST.
CITY-ST-ZIP CRESCENT CITY, FL 32112 ☐ Change ☒ Addition

TITLE 2VP
NAME PAT BARUFALDI
STREET ADDRESS 221 OLEANDER AVE.
CITY-ST-ZIP CRESCENT CITY, FL 32112 ☐ Change ☒ Addition

TITLE 3VP
NAME CAROL HORNER
STREET ADDRESS 202 N. SUMMIT ST.
CITY-ST-ZIP CRESCENT CITY, FL 32112 ☐ Change ☒ Addition

TITLE RSEC
NAME DENISE SAUERWALD
STREET ADDRESS 210 SARATOGA DR.
CITY-ST-ZIP SATSUMA, FL 32189 ☐ Change ☒ Addition

TITLE TREAS.
NAME MYRA LORD
STREET ADDRESS 219 N. LAKE ST.
CITY-ST-ZIP CRESCENT CITY, FL 32112 ☐ Change ☒ Addition

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: Myra Lord MYRA LORD 4-30-08 386-698-1231
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #