

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90218 005 ****61.25

DOCUMENT # 742348

1. Entity Name

GFWC MYRTLE GROVE WOMAN'S CLUB, INCORPORATED



Principal Place of Business

**885 N 70TH AVE
PO BOX 3328
PENSACOLA FL 32516**

Mailing Address

**PO BOX 3328
PENSACOLA FL 32516-3528
US**

14007706



1st MOORE CR2E037 (10/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-6207793

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**MARGE, GUSTAFSON
4970 CATALINE CIR.
PENSACOLA FL 32506-5343**

Name

Catherine Waller

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

7025 Weatherwood Drive

City

Pensacola

FL

Zip Code
32506-

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

Catherine M. Waller

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/22/05

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME EPLEY, JEANNE ☒ Delete
STREET ADDRESS 619 N. 63RD AVE
CITY-ST-ZIP PENSACOLA FL 32506-3895

TITLE President ☒ Change ☐ Addition
NAME Marguerite Gustafson
STREET ADDRESS 4970 Catalina Cr.
CITY-ST-ZIP Pensacola, FL 32506

TITLE VD ☒ Delete
NAME GUSTAFSON, MARGE
STREET ADDRESS 4970 CATALINA CIR.
CITY-ST-ZIP PENSACOLA FL 32506-5343

TITLE vice-President ☒ Change ☐ Addition
NAME Roth Burnette
STREET ADDRESS 5 Billingsley Place
CITY-ST-ZIP Pensacola, FL 32506

TITLE TD ☐ Delete
NAME LUCAS, CONNIE
STREET ADDRESS 7102 OLSEN ROAD
CITY-ST-ZIP PENSACOLA FL 32506-3859

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

Connie M. Lucas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Connie M. Lucas

4/22/05 850-456-5392

Date

Daytime Phone #