2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742348

FILED Jan 12, 2009 Secretary of State

Entity Name: GFWC MYRTLE GROVE WOMAN'S CLUB, INCORPORATED

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

885 N 70TH AVE 885 N 70TH AVE

PO BOX 3328 PENSACOLA, FL 32516

PENSACOLA, FL 32516

Current Mailing Address: New Mailing Address:

PO BOX 3328

PENSACOLA, FL 325163528 US

FEI Number: 59-6207793 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WALLER, CATHERINE 7025 WEATHERWOOD DRIVE PENSACOLA, FL 32506 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:

NL.

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 ELLIOT, ETHEL
 Name:
 WALLER, CSTHERINE

 Address:
 1922 E FISHER ST
 Address:
 7025 WEATHERWOOD DR.

 City-St-Zip:
 PENSACOLA, FL 32506
 City-St-Zip:
 PENSACOLA, FL 32506

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

 Name:
 FLUCK, OZELLE
 Name:
 ANDREWS, DIÂNNE P

 Address:
 319 CALHOUN AVE
 Address:
 7501 KLONDIKE ROAD

 City-St-Zip:
 PENSACOLA, FL 325072826
 City-St-Zip:
 PENSACOLA, FL 32526

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

Name:STRICKLAND, ALBERTAName:STRICKLAND, ALBERTAAddress:34 HUNTINGTON DRAddress:34 HUNTINGTON DRCity-St-Zip:PENSACOLA, FL 325064110City-St-Zip:PENSACOLA, FL 32506

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: ALBERTA STRICKLAND T 01/12/2009