2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742570

Apr 25, 2007 Secretary of State

Entity Name: SEBASTIAN RIVER JUNIOR WOMAN'S CLUB, INC.

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

952 U.S. HIGHWAY #1 SEBASTIAN, FL 32958

Current Mailing Address: New Mailing Address:

952 U.S. HIGHWAY #1 SEBASTIAN, FL 32958

FEI Number: 59-1838421 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:

GORE, GREGORY J. 710 WASHINGTON PLAZA SUITE 8 SEBASTIAN, FL 32958 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete MESSERSMITH, KATHLEEN MESSERSMITH, KATHLEEN Name: Name: 767 GLENCOVE ST. Address: 767 GLENCOVE ST. Address: City-St-Zip: SEBASTIAN, FL 32958 City-St-Zip: SEBASTIAN, FL 32958

Title: Title: (X) Change () Addition () Delete VOTAPKA, LINDA Name: VOTAPKA, LINDA Name:

Address: 8405 75TH CT. Address: 8405 75TH CT. City-St-Zip: VERO BEACH, FL 32967 City-St-Zip: VERO BEACH, FL 32967

Title: () Delete Title: (X) Change () Addition RICHTER, ANNIE HULSE, SHERYL K Name: Name:

907 BLOSSOM DRIVE Address: Address: 413 QUARRY LN City-St-Zip: SEBASTIAN, FL 32958 City-St-Zip: SEBASTIAN, FL 32958

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

Name: HULSE, THEODORA Name: HULSE, THEODORA **402 COPLY TERRACE** 402 COPLY TERRACE Address: Address: City-St-Zip: SEBASTIAN, FL 32958 City-St-Zip: SEBASTIAN, FL 32958

Title: () Delete Title: () Change () Addition

CAMMAROTA, BETHANY Name: Name: 121 ALDEA DR Address: Address: City-St-Zip: SEBASTIAN, FL 32958 City-St-Zip:

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

LARSON, AMANDA J Name: Name: Address: Address: 2615 QUAY DOCK RD VERO BEACH, FL 32958 City-St-Zip: City-St-Zip:

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: BETHANY CAMMAROTA Т 04/25/2007