2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755223

FILED Mar 30, 2008 Secretary of State

Entity Name: GFWC MELBOURNE AREA JUNIOR WOMAN'S CLUB, INC.

Current P	Principal Place	of Business:	New Principal Place	or Dusilless.
	NIC DRIVE RNE, FL 32901	US		
	•			
Current N	/lailing Address	s:	New Mailing Addres	ss:
	NIC DRIVE RNE, FL 32901	US		
El Number	r: 59-1739311	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
900 SOU SUITE 128	ACCUS, HORSL JTH HARBOR C 8 RNE, FL 32901	ITY BLVD.		
he above				
	e named entity s e of Florida.	ubmits this statement for the	purpose of changing its register	ed office or registered agent, or both,
n the Stat	e of Florida.	upmits this statement for the	purpose of changing its register	ed office or registered agent, or both,
n the Stat	e of Florida. RE:	c Signature of Registered Ac		ed office or registered agent, or both, Date
n the Stat SIGNATU	e of Florida. RE:	c Signature of Registered Ac	gent	
n the Stat GNATU FFICER itle: ame: ddress:	e of Florida. RE: Electroni S AND DIRECT	c Signature of Registered Ac F ORS: Delete LY ANN RIVE	gent	Date
on the State SIGNATU DFFICER itle: ame: ddress: ity-St-Zip: itle: ame: ddress:	Electroni Electroni S AND DIRECT PD () CORBLEY, SALI 2404 SCENIC D MELBOURNE, F	c Signature of Registered Ag ORS: Delete LY ANN RIVE L 32901 US Delete	pent ADDITIONS/CHANG Title: Name: Address:	Date SES TO OFFICERS AND DIRECTOR
n the Stat SIGNATU	E of Florida. RE: Electroni S AND DIRECT PD () CORBLEY, SALI 2404 SCENIC D MELBOURNE, F VP () HAYES, LINDA 310 HAILWOOD MELBOURNE, F SD () GREINER, LAUE 410 DRIFTWOO	c Signature of Registered Agrons: Delete LY ANN RIVE L 32901 US Delete DRIVE L 32901 US	Title: Name: Address: City-St-Zip: Name: Name: Address: Address:	Date SES TO OFFICERS AND DIRECTOR () Change () Addition

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: SALLY ANN CORBLEY PD 03/30/2008