

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 758789

**FILED**  
**Mar 31, 2010**  
**Secretary of State**

**Entity Name:** THE TAMPA BAY AREA WOMAN'S CLUB, INC.

**Current Principal Place of Business:**

8570 ACORN RIDGE COURT  
TAMPA, FL 33625 US

**New Principal Place of Business:**

**Current Mailing Address:**

8570 ACORN RIDGE COURT  
TAMPA, FL 33625 US

**New Mailing Address:**

8570 ACORN RIDGE CT  
TAMPA, FL 33625 US

**FEI Number:** 59-2166794

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

JONES, AUDREY W  
2253 NORWEGIAN DR #55  
CLEARWATER, FL 33763 US

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

WOLFE, JUDY L  
5005 PICKETT CT  
TAMPA, FL 33624 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: JUDY L WOLFE

03/31/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PASCH, IRENE  
Address: 4248 BRENTWOOD PARK  
City-St-Zip: TAMPA, FL 33624 US

Title: T  
Name: AMICK, LUCILLE  
Address: 8570 ACORN RIDGE COURT  
City-St-Zip: TAMPA, FL 33625

Title: V  
Name: RAINEY, LILLIAN  
Address: 5637 TERRAIN DE GOLF DR  
City-St-Zip: LUTZ, FL 33558 US

I hereby 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 all other like empowered.

SIGNATURE: LUCILLE AMICK

T

03/31/2010

Electronic Signature of Signing Officer or Director

Date