

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762009

FILED
Jan 10, 2011
Secretary of State

Entity Name: WOMAN'S CLUB OF ST. CLOUD, FLORIDA, INC.

Current Principal Place of Business:

1014 MASSACHUSETTS AVE.
ST CLOUD, FL 347707057

New Principal Place of Business:

Current Mailing Address:

1014 MASSACHUSETTS AVE.
P O BOX 700057
ST CLOUD, FL 347707057

New Mailing Address:

1014 MASSACHUSETTS AVE.
ST CLOUD, FL 347707057

FEI Number: 30-0472776

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANK, MARY E
1793 CHRISTINA LEE LN
SAINT CLOUD, FL 34769 US

Name and Address of New Registered Agent:

HECTOR, EILEEN B
4873 FELS COVE AVE
KISSIMMEE, FL 34744 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: EILEEN B HECTOR

01/10/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: BAUST, CHARMAINE
Address: 2316 SWEETWATER BLVD
City-St-Zip: SAINT CLOUD, FL 34772

Title: T
Name: HECTOR, EILEEN B
Address: 4873 FELS COVE AVE
City-St-Zip: KISSIMMEE, FL 34744

Title: VPD
Name: MCKEOWN, BETTY
Address: 1616 GAR ST
City-St-Zip: SAINT CLOUD, FL 34771

Title: S
Name: LANE, CHERYL
Address: 623 MASSACHUETTS AV
City-St-Zip: SAINT CLOUD, FL 34769

Title: O
Name: MCCLURE, LUCILLE W
Address: 1121 VIRGINIA AVE.
City-St-Zip: ST CLOUD, FL 34769

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 W MCCLURE

O

01/10/2011

Electronic Signature of Signing Officer or Director

Date