

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 765128

1. Entity Name

~~SOROSIS WOMAN'S CLUB OF AUBURNDALE, INC.~~ 12/20/99
Name changed to: GFWC AUBURNDALE WOMAN'S CLUB, INC.

FILED

00 APR 17 PM 12:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business % ANN W JAMES 115 PATTERSON DRIVE AUBURNDALE FL 33823	Mailing Address % ANN W JAMES 115 PATTERSON DRIVE AUBURNDALE FL 33823-2323
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country

DO NOT WRITE IN THIS SPACE
3/31/00 90081 016 \$101.25

4. FEI Number 59-2517363	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent

JAMES, ANN W
115 PATTERSON DRIVE
AUBURNDALE FL 33823

7. Name and Address of New Registered Agent

Name --
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LASSEINGE, LINDA 1501 AUBURN OAKS BLVD AUBURNDALE FL 33823 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JAMES, JANET 901 LIBERTY LANE AUBURNDALE FL 33823 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MCNEILL, JEANNE 129 LAKEVIEW DR AUBURNDALE FL 33823 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FAULKNER DAVIS, CAROL 123 VAN FLEET CRT AUBURNDALE FL 33823 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BRANDEBERRY, BABE 4339 DORAL CRT LAKELAND FL 33801 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CALHOUN, ANNE 2030 KIRKLAND RD AUBURNDALE FL 33823 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President McNeill, Jeanne 129 Lakeview Drive Auburndale, FL 33823 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President-Elect Ball, Paula 4354 Dirkshire Loop Lakeland, FL 33801 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President (D) Cinquanti, Sally 1241 Keystone Court Auburndale, FL 33823 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Lasseigne, Linda 1501 Auburn Oaks Blvd. Auburndale, FL 33823 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Corresponding Secretary (D) Garrison, Mary 149 Kinstle Avenue Auburndale, FL 33823 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer (D) Douglas, Audrey 1004 Lake Shore Drive Auburndale, FL 33823 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jeanne McNeill **REQUIRE** Jeanne McNeill Feb. 11, 2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)

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