

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90203 035 ****61.25

DOCUMENT # 765128

1. Entity Name
GFWC AUBURDALE WOMAN'S CLUB, INC.



Principal Place of Business Mailing Address
% ANN W JAMES **% ANN W JAMES**
115 PATTERSON DRIVE **115 PATTERSON DRIVE**
AUBURDALE FL 33823 **AUBURDALE FL 33823**

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2517363** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
JAMES, ANN W
115 PATTERSON DRIVE
AUBURDALE 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. I am familiar with, and accept the obligations of registered agent.

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. **\$5.00 May Be Added to Fees**

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|----------------|--------------------------------|--|
| TITLE | TD | <input checked="" type="checkbox"/> Delete |
| NAME | HALL, PAULA | |
| STREET ADDRESS | 4354 DIRKSHIRE LOOP | |
| CITY-ST-ZIP | LAKELAND FL 33801-0392 | |
| TITLE | P | <input type="checkbox"/> Delete |
| NAME | BRANDBERRY, BABE | |
| STREET ADDRESS | 5339 DORAL COURT | |
| CITY-ST-ZIP | LAKELAND FL 33801-0319 | |
| TITLE | PE | <input type="checkbox"/> Delete |
| NAME | JAMES, ANN | |
| STREET ADDRESS | 115 PATTERSON DRIVE | |
| CITY-ST-ZIP | AUBURDALE FL 33823 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | HOWELL, TERRI | |
| STREET ADDRESS | 1252 KEYSTONE COURT | |
| CITY-ST-ZIP | AUBURDALE FL 33823-2306 | |
| TITLE | SD | <input type="checkbox"/> Delete |
| NAME | MCNEILL, JEANNE | |
| STREET ADDRESS | 129 LAKEVIEW DRIVE | |
| CITY-ST-ZIP | AUBURDALE FL 33823-2222 | |
| TITLE | CS | <input checked="" type="checkbox"/> Delete |
| NAME | CALHOUN, ANNE | |
| STREET ADDRESS | 2030 KIRKLAND ROAD | |
| CITY-ST-ZIP | AUBURDALE FL 33823-2069 | |

| | | |
|----------------|----------------------------------|--|
| TITLE | James, Ann P | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | 115 Patterson Drive | |
| STREET ADDRESS | Auburndale, FL 33823-2323 | |
| TITLE | Cinquanti, Sally PE | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | 1241 Keystone Court | |
| STREET ADDRESS | Auburndale, FL 33823-2355 | |
| TITLE | James, Janet VP/D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | 901 Liberty Lane | |
| STREET ADDRESS | Auburndale, FL 33823-9446 | |
| TITLE | McNeill, Jeanne Sec. | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | 129 Lakeview Drive | |
| STREET ADDRESS | Auburndale, FL 33823-2222 | |
| TITLE | Brandeberry, Babe T/D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | 4339 Doral Court | |
| STREET ADDRESS | Lakeland, FL 33801-0319 | |
| TITLE | Howell, Terrie D | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | 1252 Keystone Court | |
| STREET ADDRESS | Auburndale, FL 33823-2306 | |

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: *Ann James* **Ann James**

February 13, 2003 (863-5829) ⁹⁶⁷⁻

CP2E037 (10/02)