2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 04, 2005 8:00 am Secretary of State DOCUMENT # N00000004527 1. Entity Name 04-04-2005 90064 034 ****61.25 GFWC WOMEN'S CLUB OF CRESTVIEW, INC. Principal Place of Business Mailing Address 150 WOODLAWN DR PO BOX 1783 CRESTVIEW FL 32536 CRESTVIEW FL 32539 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/04) City & State City & State 4. FEI Number Applied For **NO-T APPLICABLE** Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GUTENMANN, JEANNE Street Address (P.O. Box Number is Not Acceptable) 103 FAIRWAY DRIVE CRESTVIEW FL 32536 City 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 Signature, typed or printed name of tegistered agent and title if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2005 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delete ☐ Addition **GUTENMANN, JEANNE** NAME NAME 103 FAIRWAY DRIVE STREET ADDRESS STREET ADDRESS CRESTVIEW FL 32536 CITY-ST-71P CITY-ST-ZIP D1VP ☐ Defete TITLE TITLE Change ☐ Addition MANSON, LINDA NAME NAME 206 RIVER CHASE BLVD. STREET ADDRESS STREET ADDRESS CRESTVIEW FL 32536 CITY-ST-ZIP CITY-ST-ZIP TITLE - Delete -TITLE Change -☐ Addition PAPADAPOULOS, GRACE NAME NAME 3540 BUCKHORN DR STREET ADDRESS STREET ADDRESS CRESTVIEW FL 32539 CITY-ST-ZIP CITY-ST-ZIP TITLE ☑ Delete TITLE Change ☐ Addition DT ERNESTINE Byrd LUSK, RUTH NAME NAMÉ 305 RUNNYMEAD DRIVE STREET ADDRESS 3014 Stillwell STREET ADDRESS CRESTVIEW FL 32539 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE M Addition BEDDOW, SUE NAME NAME 5760 WILDWOOD LANE STREET ADDRESS STREET ADDRESS CRESTVIEW FL 32536 CITY-ST-ZIP CITY-ST-7P Delete TITLE TITLE ☐ Change Addition BIRDSELL, MARIETTA NAME NAME 671 BROOKMEADE DR. STREET ADDRESS STREET ADDRESS CRESTVIEW FL 32539 CITY-ST-ZIP CITY-ST-ZIP

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 Gutenmann March 28, 2005 850-68

FILED