

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004527

FILED
Jan 23, 2011
Secretary of State

Entity Name: GFWC WOMAN'S CLUB OF CRESTVIEW, INC.

Current Principal Place of Business:

150 WOODLAWN DR
CRESTVIEW, FL 32536

New Principal Place of Business:

Current Mailing Address:

PO BOX 1783
CRESTVIEW, FL 32536

New Mailing Address:

PO BOX 1783
CRESTVIEW, FL 32536 US

FEI Number: 59-2865585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCLEOD, T M
375 RIDGE LAKE ROAD
CRESTVIEW, FL 32536 US

Name and Address of New Registered Agent:

COX, SHARLENE B
3199 STEWART ROAD
CRESTVIEW, FL 32539 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: SHARLENE B. COX

01/23/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: NEIDIG, KATHY
Address: 131 TRANQUILITY DRIVE
City-St-Zip: CRESTVIEW, FL 32536 US

Title: 1VP
Name: BROCKETT, JUDY
Address: 4863 LEYLAND LANE
City-St-Zip: CRESTVIEW, FL 32536 US

Title: 2VP
Name: ABNEY, NANNETTE
Address: 101 BLUE GILL WAY
City-St-Zip: CRESTVIEW, FL 32539 US

Title: T
Name: COX, SHARLENE B
Address: 3199 STEWART ROAD
City-St-Zip: CRESTVIEW, FL 32539 US

Title: RS
Name: HOLMES, VELMA
Address: P. O. BOX 882
City-St-Zip: MARY ESTHER, FL 32569 US

Title: CS
Name: CATRON, MARY L
Address: 1921 KADIMA CIRCLE
City-St-Zip: FT WALTON BEACH, FL 32547 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: SHARLENE B. COX

T

01/23/2011

Electronic Signature of Signing Officer or Director

Date