## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000000805

FILED Apr 25, 2007 Secretary of State

Entity Name: WEST FLORIDA CONFEDERATION OF CLUBS, INC.

1247 SOL	rincipal Place of Business: ITH PINELLAS AVENUE SPRINGS, FL 34689	New Principal Place of Business:
Current N	lailing Address:	New Mailing Address:
	TH PINELLAS AVENUE SPRINGS, FL 34689	
FEI Number	: 59-3711836 FEI Number Applied	For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )
Name and	l Address of Current Registered	Agent: Name and Address of New Registered Agent:
1247 SOL	LOPOULOS, JERRY S ITH PINELLAS AVENUE SPRINGS, FL 34689 US	
	e named entity submits this statemee of Florida.	ent for the purpose of changing its registered office or registered agent, or b
SIGNATU	RE:	
	Electronic Signature of Reg	stered Agent Date
OFFICER	Electronic Signature of Reg S AND DIRECTORS:	istered Agent Date  ADDITIONS/CHANGES TO OFFICERS AND DIREC
Title: Name: Address:	, and a second	· ·
Title: Name: Address: City-St-Zip: Title: Name: Address:	S AND DIRECTORS:  CD ( ) Delete DAW, WILLIAM 4035 18TH AVE S.	ADDITIONS/CHANGES TO OFFICERS AND DIREC  Title: ( ) Change ( ) Addition Name: Address:
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Address: City-St-Zip:	S AND DIRECTORS:  CD ( ) Delete DAW, WILLIAM 4035 18TH AVE S. SAINT PETERSBURG, FL 33711  VCD (X) Delete MCCLOSKEY, JACK 6933 140TH TERR N.	ADDITIONS/CHANGES TO OFFICERS AND DIREC  Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address:
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	S AND DIRECTORS:  CD ( ) Delete DAW, WILLIAM 4035 18TH AVE S. SAINT PETERSBURG, FL 33711  VCD (X) Delete MCCLOSKEY, JACK 6933 140TH TERR N. CLEARWATER, FL 33760  TD ( ) Delete ELSERT, PETE 6612 23RD ST N.	ADDITIONS/CHANGES TO OFFICERS AND DIREC  Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WILLIAM DAW CD 04/25/2007