

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2004 08:00 AM
Secretary of State

DOCUMENT # NO1000007023

1. Entity Name

GREATER NASSAU WOMEN'S SERVICES, INC.

Principal Place of Business

2007 PALM CO ROAD

FERNANDINA BEACH, FL 32034

Mailing Address

P.O. BOX 15454

FERNANDINA BEACH, FL 32035

DO NOT WRITE IN THIS SPACE



01312004 No Chg-NP

CR2E037 (10/03)

4. FEI Number
NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHAPMAN, RICHARD
1497 RAINBOW ACRES RD.
FERNANDINA BEACH, FL 32034

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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 registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00
Added to Fees

U00000031817
02/04/04-80162-023 61.25

10. OFFICERS AND DIRECTORS

TITLE BC
NAME ADKINS, JENNIFER
STREET ADDRESS 1409 S. SNAPPER LANE
CITY-ST-ZIP FERNANDINA BEACH, FL 32034

TITLE DV
NAME TOBIN, MARY ANN
STREET ADDRESS 95232 CAPTAIN'S WAY
CITY-ST-ZIP AMELIA ISLAND, FL 32034

TITLE DS
NAME WRENN, JOANE
STREET ADDRESS 2358 CAPTAIN KIDD DR.
CITY-ST-ZIP FERNANDINA BEACH, FL 32034

TITLE DT
NAME CHAPMAN, RICHARD
STREET ADDRESS 1497 RAINBOW ACRES RD.
CITY-ST-ZIP FERNANDINA BEACH, FL 32034

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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

R Chapman 1/31/2004