## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01995

FILED Apr 21, 2011 Secretary of State

Entity Name: WOMAN'S CLUB OF FORT PIERCE, FLORIDA

Current Principal Place of Business: New Principal Place of Business:

2408 S 29TH ST 2408 S 29TH ST

FT.PIERCE, FL 34948 US FT.PIERCE, FL 34981 US

Current Mailing Address: New Mailing Address:

P.O. BOX 3794

FT.PIERCE, FL 34948 US

FEI Number: 59-1196034 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WEST, MILLIE CLEVENGER, MARGE
3037 SUNRISE BLVD. 5061 NORTH A1A, #804

FORT PIERCE, FL 34982 US FORT PIERCE, FL 34949 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: MARGE CLEVENGER 04/21/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: CLEVENGER, MARGE Address: 5061 NORTH A1A, #804 City-St-Zip: FORT PIERCE, FL 34949

Title: TD

 Name:
 ISABELL, METREE

 Address:
 3605 S. INDIAN RIVER DRIVE

 City-St-Zip:
 FORT PIERCE, FL 34982

Title: FVPD

Name: FREELING, ROBERTA
Address: 2200 NORTH A1A, #1101
City-St-Zip: FORT PIERCE, FL 34949

Title: CSD

 Name:
 WEISENBACHER, ROSE

 Address:
 5061 N. A1A, #504A

 City-St-Zip:
 FORT PIERCE, FL 34949

Title: RSD

 Name:
 HANITSCHAK, ANITA

 Address:
 433 SE GUAVA TERRACE

 City-St-Zip:
 PORT SAINT LUCIE, FL 34983

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: ISABELL METREE TD 04/21/2011