## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000009155

FILED Mar 31, 2007 Secretary of State

Entity Name: GFWC NORTH PINELLAS WOMAN'S CLUB, INC.

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

26 VALENCIA CIRCLE

SAFETY HARBOR, FL 34695 US

Current Mailing Address: New Mailing Address:

P O BOX 16325

CLEARWATER, FL 337666325 US

FEI Number: 20-0312264 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:

AUTH, LAURIE 26 VALENCIA CIRCLE

SAFETY HARBOR, FL 34695 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: AUTH, LAURIE P (X) Change ( ) Addition Name: INCORVIA, SANDY

 Name:
 AUTH, LAURIE
 Name:
 INCORVIA, SANDY

 Address:
 26 VALENCIA CIRCLE
 Address:
 1105 HUNTINGTON LANE

 City-St-Zip:
 SAFETY HARBOR, FL 34695 US
 City-St-Zip:
 SAFETY HARBOR, FL 34695 US

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BLUM, MARYANN
 Name:

 Address:
 2555 WESTBROOK LANE
 Address:

 City-St-Zip:
 CLEARWATER, FL 33761 US
 City-St-Zip:

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition

Name: INCORVIA, SANDY Name: STRUK, DEBBIE

Address: 1105 HUNTINGTON LANE Address: 2764 COUNTRYSIDE BLVD #4
City-St-Zip: SAFETY HARBOR, FL 34695 US City-St-Zip: CLEARWATER, FL 33761 US

I hereby certify that the information supplied with this filing does not qualify for the 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: MARYANN BLUM T 03/31/2007