2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400000865

FILED Aug 04, 2005 Secretary of State

Entity Name: GFWC ARCADIA JUNIOR WOMAN'S CLUB, INC. **Current Principal Place of Business: New Principal Place of Business:** 2288 NW AMERICAN LEGION DR ARCADIA, FL 34266 **Current Mailing Address: New Mailing Address:** 2288 NW AMERICAN LEGION DR ARCADIA, FL 34266 FFI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMITH, NICOLLE M MCGAVIC, MITZIE W 115 EAST OAK STREET 5480 SW SMITH AVE US ARCADIA, FL 34266 ARCADIA, FL 34266 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: MITZIE W. MCGAVIC 08/04/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP () Delete () Change () Addition SMITH, NICOLLE M Name: Name: PO BOX 723 Address: Address: City-St-Zip: NOCATEE, FL 34268 City-St-Zip: Title: DV Title: () Delete () Change () Addition Name: SANDERS, SANDRA Name: Address: PO BOX 1154 Address: City-St-Zip: ARCADIA, FL 34265 City-St-Zip: Title: DS () Delete Title: () Change () Addition HINES, MANDY J Name: Name: 201 E OAK ST STE 201 Address: Address: City-St-Zip: ARCADIA, FL 34266 City-St-Zip: Title: DT () Delete Title: () Change () Addition MCGAVIC, MITZIE Name: Name: Address: 115 E OAK ST Address: City-St-Zip: ARCADIA, FL 34266 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MITZIE W. MCGAVIC DT 08/04/2005