

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011376

FILED
Jan 12, 2009
Secretary of State

Entity Name: DEFUNIAK SPRINGS WOMAN'S CLUB, INC.

Current Principal Place of Business:

106 S. 6TH ST.
DEFUNIAK SPRINGS, FL 32435

New Principal Place of Business:

Current Mailing Address:

10 ARCADIA AVE
DEFUNIAK SPRINGS, FL 32435

New Mailing Address:

33 HUBBARD ST
DEFUNIAK SPRINGS, FL 32433

FEI Number: 56-2501234

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HADDON, BETTE
10 ARCADIA AVE
DEFUNIAK SPRINGS, FL 32435 US

Name and Address of New Registered Agent:

GUZOWSKI, CHRISTINE J
33 HUBBARD ST
DEFUNIAK SPRINGS, FL 32433 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: CHRISTINE J GUZOWSKI

01/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WOSPIL, DIANE
Address: 5315 US HWY 331 S.
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

Title: VP () Delete
Name: MORRISON, PAULETTE
Address: 620 CIR DR
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

Title: S () Delete
Name: KITTELSON, JEAN
Address: 1365 BLUE POND LANE
City-St-Zip: PONCE DE LEON, FL 32455

Title: T () Delete
Name: HADDON, BETTE
Address: 10 ARCADIA AVE
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: GUZOWSKI, CHRISTINE
Address: 33 HUBBARD ST
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

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: CHRISTINE J GUZOWSKI

TRES

01/12/2009

Electronic Signature of Signing Officer or Director

Date