

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000375

FILED  
Mar 18, 2012  
Secretary of State

**Entity Name:** CAPITAL CITY WOMAN'S CLUB, INC.

**Current Principal Place of Business:**

1316 WOODGATE WAY  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 13616  
TALLAHASSEE, FL 32317

**New Mailing Address:**

**FEI Number:** 20-2277839

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TATUM, SUSAN  
1316 WOODGATE WAY  
TALLAHASSEE, FL 32308 US

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

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:**

Title: T  
Name: TATUM, SUSAN  
Address: 1316 WOODGATE WAY  
City-St-Zip: TALLAHASSEE, FL 32308

Title: P  
Name: FLETCHER, JOANN  
Address: 1631 GOODWOOD DR.  
City-St-Zip: TALLAHASSEE, FL 32308

Title: V  
Name: PFAENDER, BRUNETTA  
Address: 6175 VERDURA WAY  
City-St-Zip: TALLAHASSEE, FL 32311

Title: S  
Name: WHITE, ELIZABETH  
Address: 3112 BRANDYWINE DR.  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D  
Name: BETH, HAMILTON  
Address: 2308 ARENDELL WAY  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D  
Name: MORRIS, TERESA  
Address: 3676 LOMA FARM RD.  
City-St-Zip: TALLAHASSEE, FL 32309

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: SUSAN TATUM

T

03/18/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date