## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05073

FILED Feb 12, 2007 Secretary of State

Entity Name: THE ROSELAND WOMEN'S CLUB, INCORPORATED

Current P	rincipal Place of Business:	New Principal Place	New Principal Place of Business:	
12973 BAY ST. P O BOX 342 ROSELAND, FL 32957			12973 BAY ST. BOX 342 ROSELAND, FL 32957	
Current Mailing Address:		New Mailing Address	New Mailing Address:	
12973 BAY P O BOX 3 ROSELAN				
FEI Number:	FEI Number Applied For()	FEI Number Not Applicable (X)	Certificate of Status Desired ( )	
Name and	Address of Current Registered Agent:	Name and Address o	f New Registered Agent:	
JOHNSON, ELAINE K 13035 BAY STREET P O BOX 52 ROSELAND, FL 32957 US		13035 BAY STREET, I	JOHNSON, ELAINE K 13035 BAY STREET, BOX 52 ROSELAND, FL 32957 US	
The above in the State	named entity submits this statement for the purple of Florida.	pose of changing its registered	d office or registered agent, or both,	
SIGNATURE:			02/12/2007	
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	T () Delete JOHNSON, ELAINE K 13035 BAY STREET, P O BOX 52 ROSELAND, FL 32957	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete HOLDSWORTH, MURIEL P.O. BOX 238 ROSELAND, FL 32957	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S () Delete MCNUTT, DORIS 1191 BLOSSOM DRIVE SEBASTIAN, FL 32958	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP ( ) Delete WASHER, HARRIET, 9928 OAK ST. SEBASTIAN, FL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () Delete SPEACH, MILLIE 427 ROYAL TERN DRIVE SEBASTIAN, FL 32958	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete HANKS, WINONA P.O. BOX 386 ROSELAND, FL 32957	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ELAINE K. JOHNSON T 02/12/2007