2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2007
Secretary of State

DOCUMENT# N06000009697

Entity Name: THE GOLDEN GATE WOMAN'S CLUB, INC.

Current Principal Place of Business:

4701 GOLDEN GATE PARKWAY
NAPLES, FL 34116 US

New Principal Place of Business:

Current Mailing Address:

4701 GOLDEN GATE PARKWAY
NAPLES, FL 34116 US

New Mailing Address:

FEI Number: 23-7128383 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLAVELO, VICKI A
3610 - 21ST AVENUE, S. W.
NAPLES, FL 34117 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: P ( ) Delete
Name: INCERTA, KATHLEEN
Address: 1223 COMMONWEALTH CIRCLE, #F-103
City-St-Zip: NAPLES, FL 34116 US

Title: VP ( ) Delete
Name: MOREAU, BOBBIE
Address: 12 BLUE SKY'S DRIVE
City-St-Zip: NAPLES, FL 34104 US

Title: VP ( ) Delete
Name: DIMOND, JANICE
Address: 4390 - 23RD AVENUE, S. W.
City-St-Zip: NAPLES, FL 34116 US

Title: S ( ) Delete
Name: RYAN, MARY
Address: 4483 - 31ST AVENUE, S. W.
City-St-Zip: NAPLES, FL 34116 US

Title: S ( ) Delete
Name: ARVIN, SUZANNE
Address: 695 PINE CONE LANE
City-St-Zip: NAPLES, FL 34104 US

Title: T ( ) Delete
Name: CLAVELO, VICKI A
Address: 3610 - 21ST AVENUE, S. W.
City-St-Zip: NAPLES, FL 34117 US

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

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

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

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: VICKI A. CLAVELO T 02/01/2007

Electronic Signature of Signing Officer or Director — Date