2006 NOT-FOR-PROFIT CORPORATION

Jul 25, 2006 8:00 am **ANNUAL REPORT Secretary of State** DOCUMENT # N07318 07-25-2006 90025 034 ****61.25 GFWC TALLAHASSEE JUNIOR WOMAN'S CLUB, INC. Principal Place of Business Mailing Address % LOS ROBLES % LOS ROBLES P.O. BOX 944 P.O. BOX 944 TALLAHASSEE, FL 32302-0944 TALLAHASSEE, FL 32302-0944 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07112006 Chg-NP CR2E037 (4/06) 4. FEI Number 59-6138788 Applied For City & State City & State Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DUGGAR, THOMAS E. Street Address (P.O. Box Number is Not Acceptable) 1391 TIMBERLANE ROAD TALLAHASSEE, FL 32302 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee Is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Added to Fees Due by September 6, 2006 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Change ☐ Addition TITLE D TITLE ☐ Delete SANZONE, PATTI NAME TRO Sanzone, Patti NAME 1933 Law son Road STREET ADDRESS 1933 LAWSON ROAD STREET ADDRESS TALLAHASSEE, FL 32308 CITY-ST-ZIP CITY-ST-ZIP llahassee, FL 32305 ☐ Deleta Change Change ☐ Addition TITLE Torrisi, Karen NAME TORRISI, KAREN NAME 8101 Tally Ann Drive STREET ADDRESS 8101 TALLY ANN DRIVE STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32311 CITY-ST-ZIP Tallahassee, FL 32311 Addition Del Change TITLE ☐ Delete TITLE Sachs, Claudia 281 Pirewood Dr. GORMIN, LORI NAME NAME STREET ADDRESS 2417 DUNDEE DR. STREET ADDRESS TALLAHASSEE, FL 32309 CITY-ST-ZIP CITY-ST-ZIP Tallahassee FL 32303 ☐ Delete TITLE ☐ Change **Addition** TTLE Hall, Cherie STRICKLAND, RENEE NAME NAME 4068 Blindbrook Ct. STREET ADDRESS 3030 HARPERS FERRY DR. STREET ADDRESS TALLAHASSEE, FL 32308 CITY-ST-ZIP CITY-ST-7JP Tallahassee, FL32303 TITLE ☐ Change ☐ Addition Delete TITLE SACHS, CLAUDIA NAME STREET ADDRESS 281 PINEWOOD DRIVE STREET ADDRESS TALLAHASSEE, FL 32303 CITY-ST-7IP CITY-ST-ZIP ☐ Addition Change TD TITLE TITLE **⊠**CDelete

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attackment with an address, with all other like empowered.

CITY-ST-ZIP

NAME STREET ADDRESS

SIGNATURE:

EMBRY, TERESA

910 MAPLEWOOD AVE.

TALLAHASSEE, FL 32303

NAME

STREET ADDRESS

CITY-ST-ZIP

850-210-0500

FILED

Device Phone #