

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23668

FILED
Apr 30, 2008
Secretary of State

Entity Name: GFWC ST. PETERSBURG WOMAN'S CLUB, INC.

Current Principal Place of Business:

40 SNELL ISLE BLVD N.E.
ST. PETERSBURG, FL 33704 US

New Principal Place of Business:

Current Mailing Address:

40 SNELL ISLE BLVD N.E.
ST. PETERSBURG, FL 33704 US

New Mailing Address:

FEI Number: 59-0582246

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, REBECCA A
40 SNELL ISLE BLVD. NE
SAINT PETERSBURG, FL 33704 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: PD () Delete
Name: STEWART, REBECCA
Address: 40 SNELL ISLE BLVD NE
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: PED () Delete
Name: VACANT, VACANT
Address: 40 SNELL ISLE BLVD NE
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: 1VD () Delete
Name: POWELL, PHYLLIS
Address: 40 SNELL ISLE BLVD NE
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: SD () Delete
Name: NAHON, BEVERLY
Address: 40 SNELL ISLE BLVD NE
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: TD () Delete
Name: SHIPMAN, MYRA
Address: 40 SNELL ISLE BLVD NE
City-St-Zip: SAINT PETERSBURG, FL 33704

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PED (X) Change () Addition
Name: JAICKS, JOAN
Address: 40 SNELL ISLE BLVD NE
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: 1VD (X) Change () Addition
Name: GROLL, CAROL
Address: 40 SNELL ISLE BLVD NE
City-St-Zip: SAINT PETERSBURG, FL 33704

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 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: MYRA P SHIPMAN

TD

04/30/2008

Electronic Signature of Signing Officer or Director

Date