1/19/00-90099-005-$61.25-$61.25 1/19/

FILED
May 22, 2000 8:00 am
Secretary of State

01-19-2000 90099 005 ****61.25

DOCUMENT # N24740

1. Entity Name

GFWC WOMAN'S CLUB OF HOMESTEAD, FLORIDA, INC.

Principal Place of Business	Mailing Address
17905 SW 292 ST HOMESTEAD FL 33030 US	P O BOX 900053 HOMESTEAD FL 33090-0053 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-6145856 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LOSNER, STEVEN D 65 NW 16 STR HOMESTEAD FL 33030	Name Street Address (P.O. Box Number is Not Acceptable) City FL 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.

SIGNATURE [illegible]

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P JENSEN, MEDA A 18640 SW 295 TERRACE HOMESTEAD FL 33030	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KLEIN SALLY, 26000 SW 207TH AVE HOMESTEAD FL 33031	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREAS. MARY ANNE MUNZ 23600 SW 162 AVE HOMESTEAD, FL 33031	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ELMORE JOYCE, 405 NW 14 ST HOMESTEAD FL 33030	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P. ROSE KING 2585 SE 7 PL HOMESTEAD, FL 33033	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NELL MORTON, 1261 SANDPIPER BLVD HOMESTEAD FL 33030	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CLARK JENNETTE, 59 NE 15 ST HOMESTEAD FL 33030	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECY (COAL) MILLIE STAAUSS 2550 SE 7 PL HOMESTEAD, FL 33033	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ORIENSTEIN MARY, 32345 SW 200 CRT HOMESTEAD FL 33030	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECY (RECORDING) CANDIE ANDERSON 445 SE 26 DAV HOMESTEAD, FL 33033	☐ Change ☐ Addition

CR2E037 (9/99)

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED MARY ANN MUNZ 1-5-00 305-247-0699

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #