

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N25418

**FILED**  
**Jan 30, 2010**  
**Secretary of State**

**Entity Name:** GFWC WOMAN'S CLUB OF OCALA, INC.

**Current Principal Place of Business:**

1919 SE 7 STREET  
OCALA, FL 34471 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4444  
OCALA, FL 34478 US

**New Mailing Address:**

**FEI Number:** 59-6179195

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ANNE A. BERMAN  
1919 SE 7 STREET  
OCALA, FL 34471 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: PRES  
Name: TODD, MARY LOU  
Address: 5414 SE 5 STREET  
City-St-Zip: OCALA, FL 34471

Title: VP  
Name: ROE, CINDY  
Address: POST OFFICE BOX 723  
City-St-Zip: BELLEVIEW, FL 34421

Title: S/T  
Name: BERMAN, ANNE A  
Address: 1919 SE 7 STREET  
City-St-Zip: OCALA, FL 34471

I hereby 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 all other like empowered.

SIGNATURE: ANNE A. BERMAN

S/T

01/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date