FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -5 PM 2:57

DOCUMENT # N33999 (6)

1. Corporation Name
GREATER OCALA WOMAN'S CLUB, INC.

Principal Place of Business	Mailing Address
% RUBY PARKER 3800 S.W. 7TH ST. OCALA FL 32671	% RUBY PARKER 3800 S.W. 7TH ST. OCALA FL 32671

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/29/1989
3a. Date of Last Report: 02/01/1994
4. FEI Number: 59-2943471 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 13 Sapphire Road	26 13 Sapphire Road
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Ocala, Florida	City & State 28 Ocala, Florida
Zip 24 34472	Country 25 USA
Zip 29 34472	Country 30 USA

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
PARKER, RUBY 3800 S.W. 7TH STREET OCALA FL 32674	81 Name: Patricia Huml 82 Street Address (P.O. Box Number is Not Acceptable): 13 Sapphire Road 83 84 City: Ocala FL 85 Zip Code: 34472

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Patricia Huml, President — March 21, 1995
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	PD	☒ Change ☐ Addition
NAME	PARKER, RUBY	12 NAME	Patricia Huml	
STREET ADDRESS	3800 SW 7TH ST	13 STREET ADDRESS	13 Sapphire Road	
CITY-ST-ZIP	OCALA FL	14 CITY-ST-ZIP	Ocala, Florida 34472	
TITLE	VPS	21 TITLE	VPS	☒ Change ☐ Addition
NAME	JONES, VAL	22 NAME	Margaret Phillips	
STREET ADDRESS	8662-B S.W. 96TH LN.	23 STREET ADDRESS	1851 NE 40 Circle	
CITY-ST-ZIP	OCALA FL	24 CITY-ST-ZIP	Ocala, Florida 34470	
TITLE	VPD	31 TITLE	VPD	☒ Change ☐ Addition
NAME	HUML, PAT	32 NAME	Dorothy Allen	
STREET ADDRESS	13 SAPPHIRE RD.	33 STREET ADDRESS	4933 SE 40 Terrace	
CITY-ST-ZIP	OCALA FL	34 CITY-ST-ZIP	Ocala, Florida 34480	
TITLE	VP	41 TITLE	VP	☒ Change ☐ Addition
NAME	STENSON, KRIS	42 NAME	Bette Johnson	
STREET ADDRESS	5195 N.W. 80TH AVE.	43 STREET ADDRESS	1605 NE 36 Court	
CITY-ST-ZIP	OCALA FL	44 CITY-ST-ZIP	Ocala, Florida 34470	
TITLE	S	51 TITLE	S	☒ Change ☐ Addition
NAME	STOUT, LORRAINE	52 NAME	Nancy Newnam	
STREET ADDRESS	2850 S.E. 48TH ST.	53 STREET ADDRESS	311 NE 45 Terrace	
CITY-ST-ZIP	OCALA FL	54 CITY-ST-ZIP	Ocala, Florida 34470	
TITLE	T	61 TITLE	T	☒ Change ☐ Addition
NAME	HAMRICK, ELSIE	62 NAME	Lorraine Stout	
STREET ADDRESS	673 S.E. 18TH ST.	63 STREET ADDRESS	2850 SE 48th Street	
CITY-ST-ZIP	OCALA FL	64 CITY-ST-ZIP	Ocala, Florida 34480	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Patricia Huml — President March 21, 1995 904/
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Patricia Huml

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 27, 1995

GREATER OCALA WOMAN'S CLUB, INC.
13 SAPPHIRE ROAD
OCALA, FL 34472

SUBJECT: GREATER OCALA WOMAN'S CLUB, INC.
Ref. Number: N33999

We have received your Annual Report; however, the document **has not been filed** and is being returned for the following:

The fee to file the enclosed annual report is $130.00. If a certificate of status is desired, please add an additional $8.75.

After the corrections have been made return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Annual Report Section at (904) 487-6056.

Thank you,

Reginald Colston
ANNUAL_REPORTS Section

Letter number: 495A00013789