

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

GFWC UMATILLA WOMAN'S CLUB, INC.

FILED

Apr 16, 2001 8:00 am
Secretary of State

04-16-2001 90482 001 ****61.25

A0049800

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

Community Center
2 Center Street
Umatilla, Fl. 32784

P.O. Box 1772
Umatilla, Fl. 32784
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1895424

Applied For

Not Applicable

Zip

Country

Zip

Country

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

Stricklen, Margaret
P.O. Box 661
20020 East Highway 42
Umatilla, Fl. 32784

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

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	DP	☐ Delete
NAME	Cline, C.Lynn	
STREET ADDRESS	1040 Elk Ct. N	
CITY-ST-ZIP	Winter Springs, Fl. 32708	
TITLE	VD	☐ Delete
NAME	Webb, Juanita	
STREET ADDRESS	47109 Bear Claw Road	
CITY-ST-ZIP	Altosna, Fl. 32702	
TITLE	VP	☐ Delete
NAME	Crownover, Gleta	
STREET ADDRESS	450 S. Collins St.	
CITY-ST-ZIP	Umatilla, Fl. 32784	
TITLE	S	☐ Delete
NAME	Shelton, Virginia	
STREET ADDRESS	17401 Peru Road	
CITY-ST-ZIP	Umatilla, Fl. 32784	
TITLE	TD	☐ Delete
NAME	Davis, Helen W.	
STREET ADDRESS	112 Lakeview Terrace Drive	
CITY-ST-ZIP	Altosna, Fl. 32702-9611	
TITLE	CS	☐ Delete
NAME	Emerson, Geraldine	
STREET ADDRESS	17646 Willis V. McCall Road	
CITY-ST-ZIP	Umatilla, Fl. 32784	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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:

Helen W. Davis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-8-01 352-383-0488

after 4-25- 352-971-8992

CR2E037 (11/00)