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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -8 AM 9:42

DOCUMENT # N35863 (2)

1. Corporation Name

GFWC CLEARWATER JUNIOR WOMAN'S CLUB, INC.

Principal Place of Business	Mailing Address
~~% PEGGY RHODES~~ P.O. BOX 4061 CLEARWATER FL 34618	~~% PEGGY RHODES~~ P.O. BOX 4061 CLEARWATER FL 34618

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/28/1989
3a. Date of Last Report: 03/03/1994
4. FEI Number: NOT APPLICABLE — Applied For ☐ / Not Applicable ☒
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

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

DIROFF, DEBBIE
3547 SYLVAN EDGE DRIVE
PALM HARBOR FL 34685

10. Name and Address of New Registered Agent

81 Name: Jacobs, Mary
82 Street Address (P.O. Box Number is Not Acceptable): 12203 Twin Branch Acres Road
83
84 City: Tampa FL 85 Zip Code: 33626

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: Mary Jacobs — President-Elect — 1-25-95
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	~~D~~	1.1 TITLE	V/D	☒ Change ☐ Addition
NAME	WAIDLEY, CAROLYN	1.2 NAME		
STREET ADDRESS	109 JASMINE CIRCLE	1.3 STREET ADDRESS		
CITY-ST-ZIP	SAFETY HARBOR FL	1.4 CITY-ST-ZIP		
TITLE	~~DP~~	2.1 TITLE	P/D	☒ Change ☐ Addition
NAME	DIROFF, DEBBIE	2.2 NAME		
STREET ADDRESS	3547 SYLVAN EDGE DR	2.3 STREET ADDRESS		
CITY-ST-ZIP	PALM HARBOR FL	2.4 CITY-ST-ZIP		
TITLE	~~PD~~	3.1 TITLE	D/Pres-Elect	☒ Change ☐ Addition
NAME	~~MACBAIN, ALANA~~	3.2 NAME	Jacobs, Mary	
STREET ADDRESS	~~1657 COACHMAKERS LANE~~	3.3 STREET ADDRESS	12203 Twin Branch Acres Road	
CITY-ST-ZIP	~~CLEARWATER FL~~	3.4 CITY-ST-ZIP	Tampa, FL 33626	
TITLE	VD	4.1 TITLE		☒ Change ☐ Addition
NAME	~~LUTZ, JAYE~~	4.2 NAME	Van Vonno, Evelyn	
STREET ADDRESS	~~372 MAE COURT~~	4.3 STREET ADDRESS	1606 Governors Lane	
CITY-ST-ZIP	~~SAFETY HARBOR FL~~	4.4 CITY-ST-ZIP	Safety Harbor, FL 34695	
TITLE	DVP	5.1 TITLE		☒ Change ☐ Addition
NAME	~~WILSON, SUE~~	5.2 NAME	Melton, Dale	
STREET ADDRESS	~~1414 DOUGLAS DR~~	5.3 STREET ADDRESS	3043 Kevlyn court	
CITY-ST-ZIP	~~CLEARWATER FL~~	5.4 CITY-ST-ZIP	Safety Harbor, FL 34695	
TITLE	T	6.1 TITLE		☒ Change ☐ Addition
NAME	~~AUTH, LAURIE~~	6.2 NAME	Updegrave, Valerie	
STREET ADDRESS	~~28 VALENCIA CIRCLE~~	6.3 STREET ADDRESS	1556 Jutland Court	
CITY-ST-ZIP	~~SAFETY HARBOR FL~~	6.4 CITY-ST-ZIP	New Port Richey, FL 34655	

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)(k), 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: Deborah J. Diroff — Deborah J. Diroff — 1-25-95 — (813) 562-5649
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

6000374