

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2006 8:00 am
Secretary of State

03-15-2006 90114 037 ****61.25

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01132006 Chg-NP CR2E037 (11/05)

DOCUMENT # N35863 1. Entity Name GFWC CLEARWATER JUNIOR WOMAN'S CLUB, INC.					
Principal Place of Business P O BOX 14554 CLEARWATER, FL 33766 US				Mailing Address P O BOX 14554 CLEARWATER, FL 33766 US	
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 NOT APPLICABLE	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
MARTIN-SPRINGER, DONNA 4981 TURTLE CREEK TRAIL OLDSMAR, FL 34677			Name <u>Waidley, Carolyn</u> Street Address (P.O. Box Number is Not Acceptable) <u>109 Jasmine Circle</u> City <u>Safety Harbor</u> FL <u>34695</u>		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>Carolyn Waidley</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>			DATE <u>3-12-2006</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LUTTMAN, DIANE <input type="checkbox"/> Delete 1020 KENT LANE PALM HARBOR, FL 34683		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CANFIELD, RANDI <input type="checkbox"/> Delete 211 NORTH BAY HILLS BLVD SAFETY HARBOR, FL 34695		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PADAVICH, MARIE <input type="checkbox"/> Delete 907 KINGSCOTE CT. SAFETY HARBOR, FL 34695		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MARTIN-SPRINGER, DONNA <input checked="" type="checkbox"/> Delete 4981 TURTLE CREEK TRAIL OLDSMAR, FL 34677		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Waidley, Carolyn <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 109 Jasmine Cir. Safety Harbor, FL 34695	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WATTS, DONNA <input checked="" type="checkbox"/> Delete 2856 MCMULLEN BOOTH TD #225 CLEARWATER, FL 33761		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Cruz, Amanda <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3024 St. Croix Clearwater, FL 33759	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD NICKESON, NADINE <input checked="" type="checkbox"/> Delete 280 TUCKER ST. SAFETY HARBOR, FL 34695		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Sherbuck, Liz <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2650 Clubhouse Dr., S. Clearwater, FL 33761	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Carolyn Waidley</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u>3-12-06</u> Daytime Phone # <u>727-725-1414</u>		