

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90771 024 ****61.25

DOCUMENT # N37977	
1. Entity Name GFWC WOMAN'S CLUB OF WEST BROWARD, INC.	

Principal Place of Business 2001 NW 82 AVE PEMBROKE PINES FL 33024 US	Mailing Address 2001 NW 82 AVE PEMBROKE PINES FL 33024 US
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14018277



MOORE CR2E037 (11/03)

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 65-0201214	Applied For ☐
Not Applicable	

5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BOYD, LINDA 2001 NW 82 AVE PEMBROKE PINES FL 33024	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	Zip Code

FL

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BUONO, KAREN 1080 S.W. 92 AVENUE PLANTATION FL 33324 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DECKER, JERI 5893 N.W. 121 TERR CORAL SPRINGS FL 33076 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOYD, LINDA 2001 NW 82 AVE PEMBROKE PINES FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BARR, MARGO 13323 SW 40 STREET DAVIE FL 33330 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GOGGIN, JUDY 2020 N.W. 82 AVE PEMBROKE PINES FL 33024 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MCCLUNEY, HEIDI 1121 SW 127 TERR DAVIE FL 33325 ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BARR MARGO 13323 SW 40 STREET DAVIE FL 33330 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Goggin, Judy 2020 NW 82 Ave Pembroke PINES FL 33024 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Wirth, Jacquelyn 5401 LANCELOT LAKE DAVIE, FL 33331 ☐ Change ☒ Addition

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: Jacquelyn Wirth Jacquelyn Wirth TRES 4-28-04 954 431-6999
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #