2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37977

FILED Jan 19, 2009 Secretary of State

Entity Name: GFWC WOMAN'S CLUB OF WEST BROWARD, INC.

Current Principal Place of Business: New Principal Place of Business: 2001 NW 82 AVE PEMBROKE PINES, FL 33024 US **Current Mailing Address: New Mailing Address:** 2001 NW 82 AVE PEMBROKE PINES, FL 33024 US FEI Number: 65-0201214 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BOYD, LINDA 2001 NW 82 AVE PEMBROKE PINES, FL 33024 US 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Delete () Change () Addition POWELL, MARY Name: Name: 6501 SEDGEWYCK CIRCLE WEST Address: Address: City-St-Zip: **DAVIE. FL 33331** City-St-Zip: Title: Title: () Delete (X) Change () Addition BOYD, LINDA Name: BOYD, LINDA Name: Address: 2001 NW 82 AVE Address: 2001 NW 82 AVE City-St-Zip: PEMBROKE PINES, FL City-St-Zip: PEMBROKE PINES, FL 33024 Title: () Delete Title: () Change () Addition BARR, MARGO Name: Name: 13323 SW 40 STREET Address: Address: City-St-Zip: **DAVIE. FL 33330** City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: WIRTH, JACQUELYN Name: WIRTH, JACQUELYN 5401 LANCELOT LANE 5401 LANCELOT LANE Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33331 City-St-Zip: **DAVIE, FL 33331** Title: () Delete Title: (X) Change () Addition COGGIN, JUDY GOGGIN, JUDY Name: Name: 2020 MW 82 AVE 2020 NW 82 AVE Address: Address: PEMBROKE PINES, FL 33024 City-St-Zip: HOLLYWOOD, FL 33024 City-St-Zip: Title: () Delete Title: (X) Change () Addition CULVER, DOLORES CULVER, DOLORES Name: Name: Address: 949 SW 149 TERR Address: 949 SW 149 TERR FORT LAUDERDALE, FL 33326 SUNRISE, FL 33326 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUDY GOGGIN T 01/19/2009