

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 10, 2006 8:00 am
Secretary of State

05-10-2006 90103 038 *****70.00

DOCUMENT # N48022

1. Entity Name

EAU GALLIE WOMAN'S CLUB, INC.



Principal Place of Business

% ST. TIMOTHY LUTHERAN CHURCH
1903 CROTON ROAD
MELBOURNE FL 32935
US

Mailing Address

POST OFFICE BOX 1334
MELBOURNE FL 32901-1334
US

2. Principal Place of Business

3. Mailing Address

POST OFFICE BOX 360206

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
MELBOURNE FLORIDA

Zip

Country

Zip

Country

32936-0206

USA

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

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

CRITTENDEN, JO
2290 GRAND TETON BLVD
MELBOURNE FL 32935

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME CRITTENDEN, JO
STREET ADDRESS 2290 GRANDTETON BLVD
CITY-ST-ZIP MELBOURNE FL 32935

TITLE T ☐ Delete
NAME EVELYN, JOYCE M
STREET ADDRESS 1803 LADDERBACK CT
CITY-ST-ZIP VIERA FL 32955

TITLE VPD ☒ Delete
NAME CUMMINGS, MARJORIE
STREET ADDRESS 411 NIBLICK STREET
CITY-ST-ZIP MELBOURNE FL 32901

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VPD ☒ Change ☐ Addition
NAME CRITTENDEN, JO
STREET ADDRESS 2290 GRANDTETON BLVD
CITY-ST-ZIP MELBOURNE FL 32935

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

TITLE PD ☐ Change ☒ Addition
NAME GRAEFE, PEGGY
STREET ADDRESS 2209 WOODLAWN CIRCLE
CITY-ST-ZIP MELBOURNE FL 32934

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 exemptions contained in Section 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:

Jo Crittenden