


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2007 8:00 am
Secretary of State

04-13-2007 90189 004 ****61.25

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|--|---|---|---|--|--|
| DOCUMENT # N49295 1. Entity Name GFWC VERO BEACH WOMAN'S CLUB, INC. | | | |  | |
| Principal Place of Business 1534 21ST STREET VERO BEACH, FL 32960 US | | | Mailing Address P.O. BOX 2466 VERO BEACH, FL 32961 US | | |
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | 4. FEI Number NOT APPLICABLE | |
| Zip | | Country | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent BEYERLE, ANN 1405 82ND AVE #58 VERO BEACH, FL 32966 | | | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City | |
| 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. | | | | Applied For Not Applicable | |
| SIGNATURE <i>Ann Beyerle</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small> | | | | DATE | |
| Filing Fee is \$61.25 Due by May 1, 2007 | | 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 BEYERLE, ANN 1405 82ND AVE #58 VERO BEACH, FL 32966 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Beyerle <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP WILLIAMSON, YOLANDA 655 WALL ST VERO BEACH, FL 32960 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP JOHNSON, TERRY 2ND 95 W. MEGAN CT. VERO BEACH, FL 32960 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | RS DENVER, KITTY 1098 W. 13TH SQUARE VERO BEACH, FL 32960 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T PORTLEY, MARLENE 1915 WESTMINSTER CIR. VERO BEACH, FL 32960 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 6510 Oxford Cir. Unit 101 Vero Beach, FL 32966 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| 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: <i>Ann Beyerle</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | | Date: <i>4/17/07</i> 772-978-1183 <small>Daytime Phone #</small> | | |