


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2005 08:00 AM
Secretary of State

DOCUMENT # N92000000792	
1. Entity Name GFWC GULF COAST WOMAN'S CLUB, INC.	

Principal Place of Business 731 DRIFTWOOD DR. LYNN HAVEN, FL 32444 US	Mailing Address PO. BOX 16076 PANAMA CITY, FL 32405 US
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DO NOT WRITE IN THIS SPACE



02082005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-3167696	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	
HARE, DIANE 2589 JENKS AVE. PANAMA CITY, FL 32405	

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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 _____
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Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MYERS, DEBRA 508 CARRIE LANE LYNN HAVEN, FL 32444
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CARTER, LISA 328 N MACARTHUR PANAMA CITY, FL 32401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CSD MAYER, JOANNA 157 CANDLEWICK CIR. PANAMA CITY, FL 32405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HILLMAN, JEAN 133 W BALDWIN RD. PANAMA CITY, FL 32405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BIGGS, NEDA 125 SUMMER BREEZE RD PANAMA CITY, FL 32413
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NEUDECKER, DEANNA 4341 THOMAS DR. BOX C-4 PANAMA CITY, FL 32408

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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: 	Date: 2-8-05	Daytime Phone #: 850-762-9635
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