2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N94000002581

1. Entity Name

GFWC SUN RIDGE JUNIOR WOMEN'S CLUB, INC.



Principal Place of Business

243 E. LAKE AVENUE AUBURNDALE, FL 33823 Mailing Address

PO BOX 1904

AUBURNDALE, FL 33823

FILED Mar 13, 2006 8:00 am Secretary of State

03-13-2006 90070 020 ****61.25

. guuss.



01102006 No Chg-NP

CR2E037 (11/05)

4. FEI Number 04-3637846

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HANCOCK, BRENDA 108 VAN FLEET COURT 196 Newbern Circle AUBURNDALE, FL 33823

DO NOT WRITE IN THIS SPACE

,	\$ _.				
	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	d office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE					
.,	Filing Fee is \$61.25 Due by May 1, 2006	Election Campaign Finance Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LINDELL, JENNIFER 181 BERGEN CIRLCE AUBURNDALE, FL 33823				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HANCOCK, BRENDA 108 VAN FLEET COURT 196 Newberg Circle AUBURNDALE, FL 33823				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KEY, LINDA PO BOX 1127 AUBURNDALE, FL 33823		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS		·			•

12. I hereby certify that the information supplied with this filling 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:

CITY-ST-ZIP

SIGNATURE AND TYPED DIPPRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Hancock

3-8-26

863-967-355

Daytime Phone #