

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006362

FILED
Mar 06, 2009
Secretary of State

Entity Name: WOMAN'S CLUB OF OLDSMAR, INC.

Current Principal Place of Business:

207 EXETER ST
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 128
OLDSMAR, FL 34677

New Mailing Address:

FEI Number: 59-1691385

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JORGENSEN, A JEAN
104 SHORE DR PL
OLDSMAR, FL 34677 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: FORMAN, RIANE
Address: 612 CHESTNUT ST
City-St-Zip: OLDSMAR, FL 34677

Title: VD () Delete
Name: FITZGERALD, SHIRLEY
Address: 15 PINTAIL FR
City-St-Zip: SAFETY HARBOR, FL 34695

Title: T () Delete
Name: JORGENSEN, JEAN A
Address: 104 SHORE DR PL
City-St-Zip: OLDSMAR, FL 34677

Title: S (X) Delete
Name: SEARS, SANDY
Address: 324 SHORE DR E/P.O.BOX 43
City-St-Zip: OLDSMAR, FL 34677

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOHR, JANE
Address: 505 OAKLEAF BLVD.
City-St-Zip: OLDSMAR, FL 34677

Title: T (X) Change () Addition
Name: JORGENSEN, A. JEAN
Address: 104 SHORE DR. PLACE
City-St-Zip: OLDSMAR, FL 34677

Title: S (X) Change () Addition
Name: FORMAN, DIANE
Address: 612 CHESTMNUT ST.
City-St-Zip: OLDSMAR, FL 34677

Title: () Change () Addition
Name:
Address:
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: A. JEAN JORGENSEN

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03/06/2009

Electronic Signature of Signing Officer or Director

Date