

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 702136

**Entity Name:** GFWC - OVIEDO WOMAN'S CLUB INCORPORATED**Current Principal Place of Business:**414 KING STREET  
OVIEDO, FL 32765**Current Mailing Address:**P. O. BOX 620522  
OVIEDO, FL 32762-0522 US**FEI Number: 59-6152458****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**GARLANGER, NANCY MRS.  
5265 GARLANGER TRAIL  
OVIEDO, FL 32765 US*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: NANCY GARLANGER****04/26/2018**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRES  
Name DRAGO, CINDY MRS.  
Address 724 MILLS ESTATE PLACE  
City-State-Zip: CHULUOTA FL 32766

Title 2VP  
Name FRAIL, JESSIE MRS.  
Address 2366 ARCHER BLVD  
City-State-Zip: ORLANDO FL 37833

Title 4VP  
Name MELENDEZ, CATHY MS.  
Address 109 RESERVE CIR  
205  
City-State-Zip: OVIEDO FL 32765

Title 1VP  
Name CASALESE, JOYCE MRS.  
Address 180 E. TRADEWINDS RD  
City-State-Zip: WINTER SPRINGS FL 32708

Title 3VP  
Name CALIENDO, JULIE MRS.  
Address 60 ELLINGTON PLACE  
City-State-Zip: OVIEDO FL 32765

Title TREA  
Name ROUSE, MARTY MS.  
Address 97 S. LAKE JESSUP AVE  
City-State-Zip: OVIEDO FL 32765

*I hereby 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 all other like empowered.*

**SIGNATURE: CATHY MELENDEZ****TREASURER****04/26/2018**

Electronic Signature of Signing Officer/Director Detail

Date