

2014 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:**CARDEN, STACY MRS.
1745 OLD RIVER TRAIL
CHULUOTA, FL 32766 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: STACY CARDEN****04/28/2014**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name MCQUEEN, ROBERTA MRS.
Address 322 KING STREET
City-State-Zip: OVIEDO FL 32765

Title 1VP
Name CAMP, GERRY MRS.
Address 972 FOXFIRE TRAIL
City-State-Zip: OVIEDO FL 32765

Title 2VP
Name TICE, LAURATTA MRS.
Address 369 BENTLEY STREET
City-State-Zip: OVIEDO FL 32765

Title 3VP
Name MORAN, SANDI MRS.
Address 2782 RUNNING SPRINGS LOOP
City-State-Zip: OVIEDO FL 32766

Title 4VP
Name IVERSEN, ANGELA MRS.
Address 415 CARRIAGE WAY CT.
City-State-Zip: OVIEDO FL 32765

Title TREA
Name ROUSE, MARTY MRS.
Address 97 S. LAKE JESSUP AVENUE
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: MARTY ROUSE**TREASURER****04/28/2014**

Electronic Signature of Signing Officer/Director Detail

Date