

2021 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 711354

Entity Name: COLUMBIA COUNTY WOMEN'S CLUB, INC.**Current Principal Place of Business:**655 MARTIN L KING JR DRIVE
LAKE CITY, FL 32055**Current Mailing Address:**PO BOX 2295
LAKE CITY, FL 32056 US**FEI Number:** 59-0685929**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WALKER, EDDIE MAE MRS
908 S. W. BROOKDALE DR.
LAKE CITY, FL 32025 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:** EDDIE MAE WALKER

05/19/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name WALKER, EDDIE VMAE MRS.
Address 610 N.W. EARLY STREET
City-State-Zip: LAKE CITY FL 32055

Title S
Name MULDROW, GEORGIA
Address PO BOX 1612
City-State-Zip: LAKE CITY FL 32016

Title VP
Name TROWELL, SANDRA
Address 880 SUNSHINE PLACE
City-State-Zip: LAKE CITY FL 32055

Title T
Name LEE, GAYNELL MRS
Address FAIR VIEW ST
City-State-Zip: LAKE CITY FL 32055

Title S
Name MORELAND, KIMBERLY MRS
Address PO BOX 2941
City-State-Zip: LAKE CITY FL 32056

Title VD
Name TROWELL, SANDRA MS.
Address 880 N.W. SUNSHINE PLACE
City-State-Zip: LAKE CITY FL 32055

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: EDDIE MAE WALKER**PRESIDENT**

05/19/2021

Electronic Signature of Signing Officer/Director Detail

Date