

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 711635

**Entity Name:** GFWC SOUTHSIDE WOMAN'S CLUB OF JACKSONVILLE, INC.**Current Principal Place of Business:**4446 HENDRICKS AVE A1 #381  
JACKSONVILLE, FL 32207**Current Mailing Address:**4446 HENDRICKS AVE A1 #381  
JACKSONVILLE, FL 32207 US**FEI Number:** 59-0817788**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MARSHALL, SANDRA  
4446 HENDRICKS AVE A1 #381  
JACKSONVILLE, FL 32207 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:** SANDRA MARSHALL

02/10/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P
Name	MARSHALL, SANDRA
Address	2560 CLUB TERRACE
City-State-Zip:	JACKSONVILLE FL 32207

Title	VP
Name	FRANKENBERG, HELEN
Address	8402 HOGAN RD
City-State-Zip:	JACKSONVILLE FL 32216

Title	VP
Name	DELOACH, JANET
Address	1140 NIGHTINGALE RD
City-State-Zip:	JACKSONVILLE FL 32216

Title	VP
Name	MOUND, ALICE
Address	1431 RIVERPLACE BLVD 2107
City-State-Zip:	JACKSONVILLE FL 32207

Title	TREASURER
Name	VAN HYNING, KAREN
Address	4446 HENDRICKS AVE A1 #381
City-State-Zip:	JACKSONVILLE FL 32207

Title	SECRETARY
Name	MICHAEL , ANNE
Address	3649 MONRCLAIR DR
City-State-Zip:	JACKSONVILLE FL 32217

*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:** SANDRA MARSHALL

PRESIDENT

02/10/2016

Electronic Signature of Signing Officer/Director Detail

Date