

2015 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N13000010242

Entity Name: GFWC CASUARINA WOMAN'S CLUB INC.**Current Principal Place of Business:**1445 WEST BRANCH STREET
LANTANA, FL 33462**Current Mailing Address:**1445 WEST BRANCH STREET
LANTANA, FL 33462**FEI Number:** 26-3437618**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PATTEN, LOUIS F CPA
7556 LAKE WORTH ROAD #105
LAKE WORTH, FL 33467 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:** LOUIS F. PATTEN, CPA

09/04/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	BURTCH, CHRISTINE A
Address	1445 WEST BRANCH STREET
City-State-Zip:	LANTANA FL 33462

Title	TREASURER
Name	BEBBE, PATRICIA H
Address	6628 LAKE LOREN WAY
City-State-Zip:	LAKE WORTH FL 33467

Title	D
Name	SPURLIN, VICTORIA
Address	1415 WEST MANGO STRET
City-State-Zip:	LANTANA FL 33462

Title	SECRETARY
Name	STEPHENS, PATRICIA
Address	2003 WHARF LANE
City-State-Zip:	GREENACRES FL 33463

Title	D
Name	THOMAS, CAROLE
Address	344 PINEWOOD STREET
City-State-Zip:	LANTANA FL 33462

Title	DIRECTOR
Name	ROBINSON, DIANE
Address	201 SILVER SANDS LANE
City-State-Zip:	LANTANA FL 33462

Title	CORRESPONDING SECRETARY
Name	HOLLINGSWORTH, BONITA
Address	1415 W. MANGO STREET
City-State-Zip:	LANTANA FL 33462

Title	VP
Name	DERINGER, CHARLOTTE
Address	1315 W. PALM STREET
City-State-Zip:	LANTANA FL 33462

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: CHRISTINE A. BURTCH

PRESIDENT

09/04/2015

Electronic Signature of Signing Officer/Director Detail

Date