

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000001457

Entity Name: THE GARDEN CLUB OF WINTER HAVEN, INC.**Current Principal Place of Business:**235 SIXTH STREET NW #403
WINTER HAVEN, FL 33881**Current Mailing Address:**235 SIXTH STREET NW #403
WINTER HAVEN, FL 33881 US**FEI Number:** 51-0201768**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GERNERT, MELEA
235 SIXTH STREET NW #403
WINTER HAVEN, FL 33881 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT
Name	SANDERS, LORETTA
Address	1129 INTERLOCHEN BLVD
City-State-Zip:	WINTER HAVEN FL 33884

Title	PRESIDENT
Name	WEST, JANE
Address	1125 N LAKE HOWARD DR
City-State-Zip:	WINTER HAVEN FL 33881

Title	VP
Name	OLDT, JERI
Address	300 ISLAND WAY
City-State-Zip:	WINTER HAVEN FL 33884-3610

Title	TREASURER
Name	GERNERT, MELEA
Address	235 SIXTH ST, NW # 403
City-State-Zip:	WINTER HAVEN FL 33881

Title	ASST. TREASURER
Name	ELLIS, CRISTINA M.
Address	851 ISLAND WAY
City-State-Zip:	WINTER HAVEN FL 33884-3618

Title	CORRESPONDING SECRETARY
Name	MARTIN, LESLIE
Address	1123 INTERLOCHEN BLVD
City-State-Zip:	WINTER HAVEN FL 33884

Title	SECRETARY
Name	TERI, SAUNDERS
Address	1502 S LAKE ROCHELLE DR
City-State-Zip:	WINTER HAVEN FL 33881

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: MELEA GERNERT**TREASURER****02/17/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date