

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32516

Entity Name: GFWC WOMAN'S CLUB OF INVERNESS, FL., INC.**Current Principal Place of Business:**1715 FOREST DRIVE
INVERNESS, FL 34453**Current Mailing Address:**P O BOX 1916
INVERNESS, FL 34451-1916 US**FEI Number: 41-2212486****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HNAT, SUSAN M
534 W DOERR PATH
HERNANDO, FL 34442 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	PD
Name	KOONCE, SANDRA
Address	9425 E SOOUTHGATE DR
City-State-Zip:	INVERNESS FL 34450

Title	TD
Name	ENNIS, ZANA
Address	839 N FOXRUN TER
City-State-Zip:	INVERNESS FL 34453

Title	T
Name	HENDERSON, MAXINE
Address	8074 N HOWARD HUGHES WAY
City-State-Zip:	HERNANDO FL 34442

Title	VD
Name	LICHLYTER, VERNA
Address	8705 N HIMALAYAS PT
City-State-Zip:	DUNNELLON FL 34433

Title	T
Name	COWLES, LENORE
Address	8442 GOSPEL ISLAND RD
City-State-Zip:	INVERNESS FL 34450

Title	T
Name	WARDORP, ADELE
Address	6034 E RUSH ST
City-State-Zip:	INVERNESS FL 34452

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: ZANA ENNIS**TREASURER****04/21/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date