

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004479

Entity Name: GFWC HIGH SPRINGS NEW CENTURY WOMAN'S CLUB, INC.**Current Principal Place of Business:**40 NW 1ST AVE.
HIGH SPRINGS, FL 32643**Current Mailing Address:**P.O. BOX 1154
HIGH SPRINGS, FL 32655 US**FEI Number: 59-2401019****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MILNER, SALLIE A
20018 NW 272ND TERRACE
BOX 2165
HIGH SPRINGS, FL 32655-2165 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:** SALLIE A MILNER

01/11/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	HISTORIAN
Name	BENEDICT, BILLIEJO
Address	17532 NW 241
City-State-Zip:	HIGH SPRING FL 32643

Title	P
Name	COX, VICKIE
Address	855 MARYNIK DR
City-State-Zip:	HIGH SPRINGS FL 32643

Title	VP
Name	LAMNECK, PATTI
Address	1708 S W OLD LAKE CITY TERRACE
City-State-Zip:	HIGH SPRINGS FL 32643

Title	S
Name	PHILLIPS, WINDY
Address	452 SE DIAMONDBCK GLEN
City-State-Zip:	HIGH SPRINGS FL 32655

Title	T
Name	MILNER, SALLIE
Address	PO BOX 2165
City-State-Zip:	HIGH SPRINGS FL 32655

Title	S
Name	LARKIN, IRENE
Address	POST OFFICE BOX 1597
City-State-Zip:	ALACHUA FL 32616

Title	VP
Name	EVANS, KATY
Address	POST OFFICE BOX 473
City-State-Zip:	HIGH SPRINGS FL 32655

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: SALLIE A MILNER**TREASURER**

01/11/2014

Electronic Signature of Signing Officer/Director Detail

Date