

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 706371 (2)
1. Corporation Name
THE FORT MYERS BEACH WOMAN'S CLUB, INCORPORATED



Principal Place of Business: 175 STERLING AVENUE, FT MYERS BEACH FL 33931 US
Mailing Address: P.O. BOX 22, FT MYERS BEACH FL 33931 US

3. Date Incorporated or Qualified: 11/05/1963
3a. Date of Last Report: 04/17/1995

2. Principal Place of Business: 21 175 Sterling Ave, 22 Suite, Apt. #, etc.
2a. Mailing Address: 26 P.O. Box 22, 27 Suite, Apt. #, etc.
23 City & State: Ft. Myers Beach, FL
24 Zip: 33931, 25 Country: USA
28 City & State: Ft. Myers Beach, FL
29 Zip: 33931, 30 Country: USA

4. FEI Number: 59-6133785
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
PEDERSON, KJELL
2555 ESTERO BLVD.
FT MYERS BCH FL 33931

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL, 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	DELETED
NAME	DIXON, HELEN	
STREET ADDRESS	185 IBIS STREET	
CITY-ST-ZIP	FT MYERS BEACH FL	
TITLE	V	DELETED
NAME	KERIGAN, VIRGINIA	
STREET ADDRESS	271 RANDY LANE	
CITY-ST-ZIP	FT MYERS BEACH FL	
TITLE	VD	DELETED
NAME	RADIGAN, RITA	
STREET ADDRESS	16 MOA COURT #12	
CITY-ST-ZIP	FT MYERS FL	
TITLE	S	DELETED
NAME	ROBINSON, JULIA	
STREET ADDRESS	6E NANCY LANE	
CITY-ST-ZIP	FT MYERS BEACH FL	
TITLE	S	DELETED
NAME	KRUEGER, JERRY	
STREET ADDRESS	127 BAY MAR DRIVE	
CITY-ST-ZIP	FT MYERS BEACH FL	
TITLE	TD	DELETED
NAME	MISKE, PAT	
STREET ADDRESS	8402 ESTERO BLVD, #505	
CITY-ST-ZIP	FT MYERS BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

TO MISKE, PAT
514 SUGAR PINE LANE
NAPLES, FL 33963

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Pat Miske* 3/22/96 (941) 598-4503
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)