

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 30, 2007 8:00 am
Secretary of State

01-30-2007 90013 004 ****61.25



DOCUMENT # 707310			
1. Entity Name FORT LAUDERDALE BUSINESS AND PROFESSIONAL WOMEN'S CLUB, INC.			
Principal Place of Business C/O ELIZABETH ATHANOSOKES 3608 NE 23RD AVE FORT LAUDERDALE FL 33308 US		Mailing Address C/O ANTONIA HYLAND 427 DEER CREEK RUN DEERFIELD BEACH FL 33442 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1st MOORE CR2E037 (10/06)

4. FEI Number 59-1965647		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
HYLAND, ANTONIA 427 DEER CREEK RUN DEERFIELD BEACH FL 33442				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City			
				FL		Zip Code	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	SD HERSHMAN, ELAINE UPMINSTER K #4019 DEERFIELD BEACH FL 33442 <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAM	TD HYLAND, ANTONIA 427 DEER CREEK RUN DEERFIELD BEACH FL 33442 <input type="checkbox"/> Delete	NAM	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	PD TOLOME, CAROLE 3150 HOLIDAY SPGS. BLVD SUITE B8-11 MARGATE FL 33063 <input type="checkbox"/> Delete	STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-STATE-ZIP	D ATHANASAKOS, ELIZABETH 3603 NE 23RD AVE FORT LAUDERDALE FL 33308 <input type="checkbox"/> Delete	CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-STATE-ZIP	VPD HARDESTY, KATHLEEN 811 SE 22ND AVE SUITE 11 POMPANO BEACH FL 33063 <input type="checkbox"/> Delete	CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-STATE-ZIP	D SHEPHERD, JUDY 2550 NE 51 STREET FORT LAUDERDALE FL 33308 <input checked="" type="checkbox"/> Delete	CITY-STATE-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-STATE-ZIP		CITY-STATE-ZIP	KIRK, ANGELA 1015 CORKWOOD STREET HOLLYWOOD, FL 33019

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Antonia Hyland **ANTONIA HYLAND** 1/24/07 (954)427-5456