

FILE NOW: FILING FEE IS \$61.25

FILED

May 06 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 710972 (1)
1. Corporation Name
COMMUNITY WOMAN'S CLUB, INC.



Principal Place of Business Mailing Address
5 POINSETT DRIVE P.O. BOX 1043 COCOA FL 32923
5 POINSETT DRIVE P.O. BOX 1043 COCOA FL 32923-1043

3. Date Incorporated or Qualified 05/31/1966
3a. Date of Last Report 01/24/1996

2. Principal Place of Business 2a. Mailing Address
21 26
Suite, Apt #, etc. Suite, Apt #, etc.
22 27
City & State City & State
23 28
Zip Country Zip Country
24 25 29 30

4. FEI Number 59-6158814 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
SEARLE, MARIE
580 CANAVERAL GROVES BLVD.
COCOA FL 32926
10. Name and Address of New Registered Agent
81 Name Ryder, Jeanne
82 Street Address (P.O. Box Number is Not Acceptable) 1120 El Dorado Dr.
83
84 City Rockledge, Fl. 32955 FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0503 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: Marie Searle, President
MARIE SEARLE - TREASURER
DATE: 03-31-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	SEARLE, MARIE	1.1 TITLE PD	Ryder, Jeanne
NAME	SEARLE, MARIE	1.2 NAME	Ryder, Jeanne
STREET ADDRESS	580 CANAVERAL GROVES BLVD.	1.3 STREET ADDRESS	1120 El Dorado Dr.
CITY-ST-ZIP	COCOA FL	1.4 CITY-ST-ZIP	Rockledge, Fl. 32955
TITLE VD	RYDER, JEANNE	2.1 TITLE VD	McKee, Darthy
NAME	RYDER, JEANNE	2.2 NAME	McKee, Darthy
STREET ADDRESS	1120 EL DORADO DR.	2.3 STREET ADDRESS	1212 Japonica Lane
CITY-ST-ZIP	ROCKLEDGE FL	2.4 CITY-ST-ZIP	Cocoa, Fl. 32922
TITLE SD	BIGELOW, HILDA	3.1 TITLE	
NAME	BIGELOW, HILDA	3.2 NAME	
STREET ADDRESS	1183 INDIAN RIVER DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	COCOA FL	3.4 CITY-ST-ZIP	
TITLE T	LIVINGSTON, SUE	4.1 TITLE T	Searle, Marie
NAME	LIVINGSTON, SUE	4.2 NAME	Searle, Marie
STREET ADDRESS	8715 CAMELIA CT.	4.3 STREET ADDRESS	580 Canaveral Groves Blvd.
CITY-ST-ZIP	CAPE CANEVEAL FL	4.4 CITY-ST-ZIP	Cocoa, Fl. 32926
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Marie Searle
SIGNATURE REQUIRED MARIE SEARLE
DATE: 03-31-97
DAYTIME PHONE: 407-639-4193

CR2E037 (9/96)