

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra G. Mathem  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

95 MAY -1 AM 8: 22

**DOCUMENT # 711250 (1)**

1. Corporation Name

**PUNTA GORDA GARDEN CLUB, INC.**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>07/25/1966</b>	3a. Date of Last Report <b>02/07/1994</b>
4. FEI Number <b>59-1612027</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	<b>\$68.75</b> Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

Principal Place of Business		Mailing Address	
345 MALPELO AVENUE PUNTA GORDA FL 33983		345 MALPELO AVENUE PUNTA GORDA FL 33983	
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	24	30

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
STONE, MARY KAY 345 MALPELO AVENUE PUNTA GORDA FL 33950		81 Name <b>Fowler, Jeanette</b>	82 Street Address (P.O. Box Number is Not Acceptable) <b>4000 Bal Harbor Blvd. #317</b>
		83 <b>Punta Gorda, Fl. 33950-8216</b>	84 City <b>FL</b> 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE Jeanette Fowler, President DATE April 20, 1995  
(NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STONE, MARY KAY	1.2 NAME	Fowler, Jeanette
STREET ADDRESS	345 MALPELO AVENUE	1.3 STREET ADDRESS	4000 Bal Harbor Blvd. #317
CITY - ST - ZIP	PUNTA GORDA FL 33983	1.4 CITY - ST - ZIP	Punta Gorda, Fl. 33950 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	VD	2.1 TITLE	V. Pres. D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANE, DERITH	2.2 NAME	Tucker, Diana
STREET ADDRESS	2425 FLORA LANE	2.3 STREET ADDRESS	1020 W. Marion Ave. #49
CITY - ST - ZIP	PUNTA GORDA FL 33950	2.4 CITY - ST - ZIP	Punta Gorda, Fl. 33950-6324 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	S	4.1 TITLE	Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HERMANN, ROSEMARIE	4.2 NAME	West, Agnes
STREET ADDRESS	1208 VIA TRIPOLI	4.3 STREET ADDRESS	2490 Palm Tree Dr. Punta Gorda, FL 33950
CITY - ST - ZIP	PUNTA GORDA FL 33950	4.4 CITY - ST - ZIP	Lillian Williams <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	T	5.1 TITLE	Lillian Williams
NAME	EADES, MARY JANE	5.2 NAME	2160 Agui Esta Dr.
STREET ADDRESS	2735 MAGADALINA DRIVE	5.3 STREET ADDRESS	Punta Gorda, Fl 33950-1509
CITY - ST - ZIP	PUNTA GORDA FL 33950	5.4 CITY - ST - ZIP	Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D	6.1 TITLE	Director
NAME	SIMPSON, ANNE	6.2 NAME	h Lane, Derith
STREET ADDRESS	601 SHREVE STREET #55A	6.3 STREET ADDRESS	2426 Flora Lane
CITY - ST - ZIP	PUNTA GORDA FL 33950	6.4 CITY - ST - ZIP	Punta Gorda, FL 33950-1509

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the protection of the 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: Jeanette Fowler, President Jeanette Fowler, April 20, 1995 (813) 639-7578  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (Optional)