2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 711600 Apr 17, 2000 8:00 am Secretary of State 1. Entity Name DELTONA WOMAN'S CLUB, INC. 04-17-2000 90099 007 ****61.25 Mailing Address Principal Place of Business 1049 E NORMANDY BLVD PO BOX 5361 **DELTONA FL 32728-5361 DELTONA FL 32725** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 23-7089777 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BOYLE. LAVAUGHN E. Street Address (20 HOFFMAN, ELIZABETH J 1212 E. HANCOCK DRIVE **DELTONA FL 32725** City ₹2738-7905 DILTONA 8. The above named entity subprits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida SIGNATURE Standard AUGHN E of egistered agent and title if applicable ASURER Make Check Payable to **FILE NOW:** 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. \Box Department of State Added to Fees FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. SD K1 Change Maddition Delete TITLE TITLE NAME MATTHEWS, JEAN NAME lester, Elizabeth STREET ADDRESS 782 GORDON COURT STREET ADDRESS 1301 TIVOLI DR CITY-ST-ZIP CITY-ST-ZIE <u>DELTONA, FL 32725</u> **DELTONA FL 32725** ☐ Addition Change X Delete TITLE VŊ TITLE ۷D CRAWLEY, VALERIE NAME BICKFORD, HENRIETTA NAME STREET ADDRESS 1921 URBANA AVENUE STREET ADDRESS 1029 HEMINGWAY DR CITY-ST-ZIP DELTONA, FL 32725 CITY-ST-ZIP **DELTONA FL 32725** K Change ☐ Addition ATD TITLE X Delete TITLE atd NAME DORY CIARAMITARO MCKAHAN, NORMA NAME STREET ADDRESS STREET ADDRESS 1220 CENTRAL TRAIL 2341 EAST DANA DRIVE CITY-ST-ZIP DELTONA, FL 32738 CITY-ST-ZIP DELTONA FL 32725 K Change ☐ Addition SD TITLE TITLE SD X Delete NAME VIRGINIA MARRERO BOYLE, LAVAUGHN NAME STREET ADDRESS STREET ADDRESS 1096 FOUNTAINHEAD DRIVE 954 HUMPHREY BLVD CITY-ST-ZIP CITY-ST-ZIP DELTONA, FL 32725 **DELTONA FL 32738** ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME POLLACK, JOAN STREET ADDRESS STREET ADDRESS 2054 DALTON AVE CITY-ST-ZIP CITY-ST-ZIP **DELTONA FL 32725** K Change ☐ Addition X Delete TITI F HOFFMAN, ELIZABETH NAME NAME LAVAUGHN E. BOYLE STREET ADDRESS STREET ADDRESS 1212 E. HANCOCK DR.

CITY-ST-ZIP DELTONA FL 32725

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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

CITY-ST-ZIP

04/10/00

Date

954 HUMPHREY BOULEVARD

407/860-7034

CR2E037

Daytime Phone #