

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

FILED

97 OCT 10 AM 7:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 714366 (2)

1. Corporation Name
EAST PALMETTO WOMENS CLUB, INC.



Principal Place of Business
**1600 8TH AVE W
PALMETTO FL 34220
US**

Mailing Address
**P O BOX 251
PALMETTO FL 34220-0251
US**

3. Date Incorporated or Qualified **04/02/1968** 3a. Date of Last Report **03/06/1996**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-2456840		Applied For Not Applicable	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
22	City & State	27	City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
23	Zip	28	Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			
24	Country	29	Country				

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
BALKMAN, MELDORÉ 210 15TH STREET WEST PALMETTO FL 34221				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83	000002320969--6 -10/15/97--01074--006		
				84	City *****61.25 FL *****61.25		

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 Lila B. Woodson Signature typed or printed name of registered agent, and title if applicable. (NOT a required signature required when reinstating.) 3/4/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	President
NAME	BALKMAN, MELDORÉ	1.2 NAME	Balkman, mclDore
STREET ADDRESS	210 15TH ST., E.	1.3 STREET ADDRESS	210 15th St. East
CITY-ST-ZIP	PALMETTO FL	1.4 CITY-ST-ZIP	Palmetto, FL 34221
TITLE	S	2.1 TITLE	Secretary
NAME	SIMMONS, DOROTHY	2.2 NAME	Dorothy Simmons
STREET ADDRESS	3004 9TH AVE. DR., E.	2.3 STREET ADDRESS	3004 9th Ave. Dr. East
CITY-ST-ZIP	PALMETTO FL	2.4 CITY-ST-ZIP	Palmetto, FL 34221
TITLE	T	3.1 TITLE	Treasurer
NAME	WOODSON, LILA B	3.2 NAME	Lila B. Woodson
STREET ADDRESS	2504 18TH AVE. E.	3.3 STREET ADDRESS	2504 16th Ave. E.
CITY-ST-ZIP	PALMETTO FL	3.4 CITY-ST-ZIP	Palmetto, FL 34220
TITLE	D	4.1 TITLE	Board member
NAME	SAMUEL, GLORIA	4.2 NAME	samuel, Gloria
STREET ADDRESS	P O BOX 773 N/A	4.3 STREET ADDRESS	P.O. Box 773, N/A
CITY-ST-ZIP	PALMETTO FL	4.4 CITY-ST-ZIP	Palmetto, FL 34226
TITLE	D	5.1 TITLE	Board member
NAME	FELTON, JOYCE	5.2 NAME	Felton Joyce
STREET ADDRESS	2457 51ST AVE CIR W	5.3 STREET ADDRESS	2457 51st Ave Cir. West
CITY-ST-ZIP	BRADENTON FL	5.4 CITY-ST-ZIP	Bradenton, FL
TITLE	D	6.1 TITLE	Board Member
NAME	Clytha Mae Cromartie	6.2 NAME	Clytha Mae Cromartie
STREET ADDRESS	1503 16th st. R.	6.3 STREET ADDRESS	1503 16th St E
CITY-ST-ZIP	Bradenton, FL 34208	6.4 CITY-ST-ZIP	Bradenton, FL 34208

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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.

CR2E037 (9/96)