

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

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 FEB - 1 PM 1:58

DOCUMENT # 737194 (1)

1. Corporation Name

BROWARD INTERNATIONAL WOMEN'S CLUB, INC.

Principal Place of Business

Mailing Address

320 SE 9 STREET  
FT LAUDERDALE FL 33316

320 SE 9 STREET  
FT LAUDERDALE FL 33316

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/01/1976	3a. Date of Last Report 07/12/1994
4. FEI Number 59-1730444	Applied For Not Applicable

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

5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status	<input checked="" type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DOUGLASS, GEORGETTE SOSA  
320 SE 9 STREET  
FT. LAUDERDALE, FL 33316

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	DOUGLASS, GEORGETTE SOSA
STREET ADDRESS	320 SE 9 STREET
CITY - ST - ZIP	FT LAUDERDALE FL 33316
TITLE	VD
NAME	LA FLEUR, KAREN
STREET ADDRESS	1016 SW 5 PLACE
CITY - ST - ZIP	FT LAUDERDALE FL 33312
TITLE	VD2
NAME	LICHTINGER, RINA
STREET ADDRESS	2880 NE 55TH CT
CITY - ST - ZIP	FT LAUDERDALE FL 33308
TITLE	TD
NAME	LISTON, SUSANA
STREET ADDRESS	1910 NE 56 ST.
CITY - ST - ZIP	FT LAUDERDALE FL 33308
TITLE	SD
NAME	GRIFFIN, ANN
STREET ADDRESS	7480 SW 5 ST.
CITY - ST - ZIP	PLANTATION FL 33317
TITLE	D
NAME	BRADY, JANET
STREET ADDRESS	7440 SW 15 ST.
CITY - ST - ZIP	PLANTATION FL 33317

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 hereof, or on an attachment with an address.

SIGNATURE

Georgette Sosa Douglas, President

04-16-95 768-0046