

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 27, 2001 8:00 am
Secretary of State

01-27-2001 90071 037 ****61.25

DOCUMENT # 762389

1. Entity Name

PUNTA GORDA WOMAN'S CLUB, INC.

Principal Place of Business

118 SULLIVAN STREET
PUNTA GORDA FL 33950
US

Mailing Address

P O BOX 511783
PUNTA GORDA FL 33951
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2040620

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WROBBEL, HELEN
8030 RIVERSIDE DR.
PUNTA GORDA FL 33982

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Delete
NAME **STONE, HELEN**
STREET ADDRESS **25068 HARBORVIEW RD #4D**
CITY-ST-ZIP **PORT CHARLOTTE FL 33980**

TITLE ☒ Change ☐ Addition
NAME **CALDERWOOD, HELEN** **Name only**
STREET ADDRESS
CITY-ST-ZIP

TITLE **VD** ☒ Delete
NAME **LECHNER, GRACE**
STREET ADDRESS **10269 SHADOW RUN CT**
CITY-ST-ZIP **PUNTA GORDA FL 33955**

TITLE ☒ Change ☐ Addition
NAME **VD GLATT, ALICE**
STREET ADDRESS **801 Riviera LANE**
CITY-ST-ZIP **Port Charlotte, Florida 33948**

TITLE **VD** ☒ Delete
NAME **NELSON, MARGARET**
STREET ADDRESS **10184 ARROWHEAD DR**
CITY-ST-ZIP **PUNTA GORDA FL 33955**

TITLE ☒ Change ☐ Addition
NAME **VD SWINK, MARGARET**
STREET ADDRESS **621 Trabue Avenue**
CITY-ST-ZIP **Punta Gorda, FL 33950**

TITLE **T** ☒ Delete
NAME **SWINK, MARGARET**
STREET ADDRESS **621 TRABUE AVENUE**
CITY-ST-ZIP **PUNTA GORDA FL**

TITLE ☒ Change ☐ Addition
NAME **T MARGARET Nelson**
STREET ADDRESS **10184 Arrowhead Dr**
CITY-ST-ZIP **Punta Gorda, FL 33955**

TITLE **RS** ☐ Delete
NAME **HELLER, MARGARET**
STREET ADDRESS **24224 PIRATE HARBOR**
CITY-ST-ZIP **PUNTA GORDA FL 33955**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **CS** ☒ Delete
NAME **GLATT, ALICE**
STREET ADDRESS **24259 YACHT CLUB BLVD**
CITY-ST-ZIP **PUNTA GORDA FL 33950**

TITLE ☐ Change ☒ Addition
NAME **CS KROTZER, MARY**
STREET ADDRESS **1374 Jacana Court**
CITY-ST-ZIP **Punta Gorda, FL 33950**

12. I 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 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 empowerment.

SIGNATURE:

Margaret Nelson Margaret Nelson

Helen Wrobbel Helen Wrobbel

Date

Daytime Phone #

1-16-01 (941) 639-3360

CR2E037 (10/00)