2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2003 8:00 am
Secretary of State
04-09-2003 90108 047 ****61.25

0051937

DOCUMENT # 762389

1. Entity Name
PUNTA GORDA WOMAN'S CLUB, INC.

Principal Place of Business	Mailing Address
118 SULLIVAN STREET PUNTA GORDA FL 33950 US	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

☐ CHECK HERE IF MAKING CHANGES

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

NELSON, MARGARET
10184 ARROWHEAD DR
PUNTA GORDA FL 33955

7. Name and Address of New Registered Agent

Name MARLENE KOENINGER
Street Address (P.O. Box Number is Not Acceptable) 106 VALDIVA ST
City PUNTA GORDA FL Zip Code 33983

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE MARLENE KOENINGER Marlene Koeninger 1-20-03
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 Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GLATT, ALICE 801 RIVERA LANE PORT CHARLOTTE FL 33980	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MARY KROTZER 1374 JACANA CT. PUNTA GORDA FL 33950	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SWINK, MARGARET 621 TRABUE AVENUE PUNTA GORDA FL 33950	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD JULIENNE. SZYBALSKI 1456 KITIWAKE PUNTA GORDA FL 33950	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD KROTZER, MARY 1374 JACANA COURT PUNTA GORDA FL 33950	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MARY LOOK 1578 MARINO CT. PUNTA GORDA FL 33950	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MARGARET, NELSON 10184 ARROWHEAD DRIVE PUNTA GORDA FL 33955	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MARLENE KOENINGER 106 VALDIVA ST PUNTA GORDA FL 33983	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RS CAROL, ROSE 3631 DARNING DRIVE PUNTA GORDA FL 33950	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RS BETTY HEMMERLE 1601 PARK BEACH CIRCLE UNIT# 135 PUNTA GORDA FL 33950	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CS SZYBALSKI, JULIENNE 1456 KITIWAKE PUNTA GORDA FL 33950	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CS MARGARET SWINK 621 TRABUE AVE. PUNTA GORDA FL 33950	☒ Change ☐ Addition

CR2E037 (10/02)

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 empowered.

SIGNATURE: Marlene Koeninger 1-20-03 9417647524
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

FILED