

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 13, 2006
Secretary of State**

DOCUMENT# N01000007523

Entity Name: DANIA BEACH WOMAN'S CLUB, INC.

Current Principal Place of Business:

17 NW 1ST AVENUE
DANIA BEACH, FL 33004

New Principal Place of Business:

Current Mailing Address:

PO BOX 1638
DANIA BEACH, FL 33004

New Mailing Address:

FEI Number: 02-0627832 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONNOR, NORMA D
206 SE 10TH STREET
401
DANIA BEACH, FL 33004 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CONNOR, NORMA D
Address: 206 SE 10TH STREET #401
City-St-Zip: DANIA BEACH, FL 33004

Title: VD () Delete
Name: LENNON, PHILOMENA
Address: 809 ARGONAUT ISLE
City-St-Zip: DANIA BEACH, FL 33004

Title: VD () Delete
Name: CORONA, DOROTHY
Address: 38 SE 11TH STREET
City-St-Zip: DANIA BEACH, FL 33004

Title: T () Delete
Name: MOSTECKI, MARY
Address: 170 SE 5TH AVENUE #307
City-St-Zip: DANIA BEACH, FL 33004

Title: S () Delete
Name: PAGE, TERESA
Address: 7580 STIRLING ROAD #114V
City-St-Zip: DAVIE, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NORMA CONNOR

PD

01/13/2006

Electronic Signature of Signing Officer or Director

Date