


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 16, 2007 8:00 am**  
**Secretary of State**

04-16-2007 90069 002 \*\*\*\*61.25

**DOCUMENT # N04000004131**

1. Entity Name  
**WEST BOCA WOMEN OF THE MOOSE #2273 INC.**



Principal Place of Business  
**131 N. POWERLINE ROAD  
 DEERFIELD BEACH, FL 33442**

Mailing Address  
**131 N. POWERLINE ROAD  
 DEERFIELD BEACH, FL 33442**

4006600



2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

04132007 Chg-NP CR2E037 (12/06)

City & State

4. FEI Number  
**26-0079801**

Applied For  
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**LUTTRELL, TAMMIE  
 131 N. POWERLINE ROAD  
 DEERFIELD BEACH, FL 33442**

7. Name and Address of New Registered Agent  
 Name **DIANNE BRELSFORD**  
 Street Address (P.O. Box Number is Not Acceptable)  
**131 N. Powerline Road**  
 City **Deerfield Bch** FL Zip Code **33442**

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 *Tammie Luttrell* (NOTE: Registered Agent signature required when reinstating) DATE **4-14-2007**

**Filing Fee is \$61.25  
 Due by May 1, 2007**

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		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VARIE-BRIGHT, DEBRA 131 N. POWERLINE ROAD DEERFIELD BEACH, FL 33442	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COFFEY, VIVIAN 131 N. POWERLINE ROAD DEERFIELD BEACH, FL 33442	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LUTTRELL, TAMMIE 131 N. POWERLINE ROAD DEERFIELD BEACH, FL 33442	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STOLTZ, PAT 131 N POWERLINE ROAD DEERFIELD BEACH, FL 33442	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C PERILLO, LYNN 131 N POWERLINE RD DEERFIELD BEACH, FL 33442	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SUSAN ROBINSON 131 N. Powerline Rd Deerfield Bch, FL 33442	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition EFF. 5/1/07
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PAT STOLTZ SAA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition EFF. 5/1/07
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Dianne Breisford SAA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition EFF. 5/1/07
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BARBARA WERNER SAA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition EFF. 5/1/07
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C JANE Vincelli SAA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition EFF. 5/1/07
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Tammie Luttrell* DATE: **4-14-2007** DAYTIME PHONE #: **954-769-3757**