

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N16809

1. Entity Name
EXECUTIVE WOMEN OUTREACH, INC.Principal Place of Business
P.O. BOX 7476
WEST PALM BEACH, FL 33405Mailing Address
P.O. BOX 7476
WEST PALM BEACH, FL 33405

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01082005

Chg-NP

CR2E037 (10/03)

4. FEI Number
59-2703382Applied For
Not Applicable6. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

5. Name and Address of Current Registered Agent

PIKE, JANE C
C/O PRIME OFFICE SYSTEMS
18838 N. OSPREY WAY
JUPITER, FL 33458

7. Name and Address of New Registered Agent

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 20059. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesFiling Fee is \$61.25
Due by May 1, 2005

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete
NAME EWING, DOROTHY
STREET ADDRESS 309 VALLETTE WAY
CITY-STATE-ZIP WEST PALM BEACH, FL 33401TITLE D ☐ Delete
NAME CLARKE, KAREN
STREET ADDRESS 139 EGNET COVE
CITY-STATE-ZIP JUPITER, FL 33458TITLE D ☒ Delete
NAME CUNNINGHAM, LAURA D
STREET ADDRESS 2751 S DIXIE HWY.
CITY-STATE-ZIP WEST PALM BEACH, FL 33405TITLE 2SD ☒ Delete
NAME GEARING, TERRY
STREET ADDRESS 11680 FICUS ST.
CITY-STATE-ZIP WEST PALM BEACH, FL 33418TITLE TD ☒ Delete
NAME COYNER, LAURA
STREET ADDRESS 333 PERUVIAN AVE.
CITY-STATE-ZIP PALM BEACH, FL 33480TITLE CD ☐ Delete
NAME VEIL, MICHELE
STREET ADDRESS 11940 BANYAN STREET
CITY-STATE-ZIP PALM BEACH GARDENS, FL 33410

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition
NAME W.S. Charlotte Pelton
STREET ADDRESS 477 Rosemary Ave
CITY-STATE-ZIP West Palm Beach, FL 33401TITLE ☐ Change ☒ Addition
NAME *[Signature]*
STREET ADDRESS
CITY-STATE-ZIPTITLE D ☐ Change ☒ Addition
NAME Susan Peterson
STREET ADDRESS 818 U.S. Hwy One
CITY-STATE-ZIP North Palm Beach, FL 33408TITLE D ☐ Change ☒ Addition
NAME Marilyn Moore
STREET ADDRESS 777 S. Flegler Dr
CITY-STATE-ZIP West Palm Beach, FL 33401TITLE TD ☐ Change ☒ Addition
NAME Pat Fitzgerald
STREET ADDRESS 901 W. Indian Town Rd
CITY-STATE-ZIP Jupiter, FL 33458TITLE ☒ Change ☐ Addition
NAME DeLong, Michele V
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(2)(f), 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

SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING OFFICER OR DIRECTOR

Date

Daytime Phone #

(561) 833-4244

(561) 746-9975