FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUN 1. Corporation	MENT # N31108	3 (6)			
NAVY WOMEN FOUNDATION, INC.					
Principal Place of Business		Mailing Address		1 108/1/01 000 (1)01 (1)00/ (1)01 (00/01)	IAL DIDIN BADAI DEBIH BIBAI DADIN IDDA
		C/O BERENICE K. GEORG	SE .		
2062 LOS LOMAS DRIVE CLEARWATER FL 34623		2062 LOS LOMAS DRIVE CLEARWATER FL 34623-4118			
				3. Date Incorporated or Qualified 3a. 03/09/1989	Date of Last Report 02/05/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21 Suite, Apt #, etc.		Suite, Apt. #, etc.		59-2998324	Not Applicable
~ ~~ ~		27 Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	· · · · · · · · · · · · · · · · · · ·	Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip 29	Country 30	8. This corporation has fiability for intang Florida Statutes Yes	
	9. Name and Address of Current F			10. Name and Address of New Register	
			81 Name		
GEORGE, BERENICE K.		82 Street A	ddress (P.O. Box Number is Not Acceptable)		
2062 LOS LOMAS DRIVE CLEARWATER FL 34623			83		
ULEARY	VAIER FL 34023				
			84 City		S Zip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE "	Signature, typed or proved name of registered agent a	and litter applicable (NOT	E: Registered Agent signature re	quired when reinstating) DAT	E
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	FLOYD, DOROTHY		1.2 NAME		
STREE1 ADDRESS	2709 CORSAIR DRIVE		1.3 STREET ADDRESS		
CITY+ST-ZIP TITLE	BIRMINGHAM AL. D	DELETE	2.1 TITLE		Change Addition
NAME	ANDERSON, ANNE		22 NAME		
STREET ADDRESS	301 JOLIET RD		23 STREET ADDRESS		
CITY-ST-ZIP	MARQUETTE HEIGHTS IL		2 4 CITY-ST-ZIP		
TITLE	TD	☐ DELETE	31 TITLE		Change Addition
NAME	GEORGE, BERENICE K.		3 2 NAME		ł
STREET ADDRESS	2062 LOS LOMAS DRIVE		3 3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL	B. P. P. P.	3.4. CITY - ST - ZIP		
TITLE	VPD	DELETE	4.1 TITLE		Change Addition
NAME	JAHN, MARY J. 104 WINDCLIFFE DR		4. 2 NAME		
STREET ADDRESS	BALLWIN MO		4.3 STREET ADDRESS		ļ
CATY-ST-ZIP TITLE	PD PD	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME	DAVIS, CHARLOTTE		5.2 NAME		
STREET ADDRESS	RD BOX 274A		5.3 STREET ADDRESS		
CITY-ST-ZIP	WAPWALLOPEN PA		5.4 CITY - ST - ZIP		
TITLE	D	DELETE	6.1 TITLE		Change Addition
NAME	RUDD, DOROTHY		6.2 NAME	1 4 8	
STREET ADDRESS	-RT Q BOX 648		6.3 STREET ADDRESS	Rt 1 - Box 64 B	
CITY-ST-ZIP	TOOMSBORO GA		6.4 CITY - ST - ZIP		

14. Ido hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, open an attachment with a address.

SIGNATURE:

ANUARY 31, 1997 813-447-0865
Date Date Dayline Prone 1 0067530

FILED

Feb 05 1997 8:00am

Secretary of State