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Feb 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N97000000727 (4)
1. Corporation Name

WOMAN'S SERVICE LEAGUE, INC. OF ST. PETERSBURG, FL.



Principal Place of Business: C/O RITA C. PRATT, 429 88 AVE, ST PETERSBURG FL 33706-1407

Mailing Address: C/O RITA C. PRATT, 429 88 AVE, ST PETERSBURG FL 33706-1407

3. Date Incorporated or Qualified: 02/10/1997

4. FEI Number: #59-3465477

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

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business

21. c/o Lou Vanderbleek
Suite, Apt #, etc.

22. 273 Bayview Dr. NE
City & State

23. St. Petersburg, Fl.
Zip Country

24. 33704-2428 25. Pinellas

26. Mailing Address

26. c/o Lou Vanderbleek
Suite, Apt #, etc.

27. 273 Bayview Dr. NE
City & State

28. St. Petersburg, Fl.
Zip Country

29. 33704-2428 30. Pinellas

9. Name and Address of Current Registered Agent

PRATT, RITA C
429 88 AVE
ST PETERSBURG FL 33706-1407

10. Name and Address of New Registered Agent

81 Name: Vanderbleek, Lou

82 Street Address (P.O. Box Number is Not Acceptable): 273 Bayview Dr. NE

83 City: St. Petersburg, Fl. 33704-2428

84 City: FL 85 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 registered 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: Lou Vanderbleek DATE: Feb 23, 1998

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	PRATT, RITA C	
STREET ADDRESS	429 88 AVE. PRATT	
CITY-ST-ZIP	ST PETERSBURG BEACH FL 33706-1407	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	LIVINGSTON, NELL	
STREET ADDRESS	4930 4TH ST S	
CITY-ST-ZIP	ST PETERSBURG FL 33705-4717	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	PREUS, JEAN	
STREET ADDRESS	9859 88 ST N	
CITY-ST-ZIP	SEMINOLE FL 33777	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	MURPHY, DOLORES	
STREET ADDRESS	14188 IROQUOIS AVE	
CITY-ST-ZIP	LARGO FL 33774	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	GRAHAM, JANICE	
STREET ADDRESS	1125 11 AVE N	
CITY-ST-ZIP	ST PETERSBURG FL 33705-1121	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	HUDSON, EARLENE	
STREET ADDRESS	4601 CHANCELLOR ST NE #248	
CITY-ST-ZIP	ST PETERSBURG FL 33705-1121	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Vanderbleek, Lou	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	P	
1.3 STREET ADDRESS	273 Bayview Dr. NE "Director"	
1.4 CITY-ST-ZIP	St. Petersburg, Fl 33704-2428	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE	V	
2.2 NAME	Rock, Gladys I. "Director"	
2.3 STREET ADDRESS	15630 Gulf Blvd.	
2.4 CITY-ST-ZIP	Redington Beach, Fl. 33708-1730	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE	V	
3.2 NAME	Hudson, Earline "Director"	
3.3 STREET ADDRESS	4601 Chancellor St.	
3.4 CITY-ST-ZIP	St. Petersburg, Fl. 33703-4312	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE	V	
4.2 NAME	Hart, Jeancarol	
4.3 STREET ADDRESS	6550 -2nd Ave. N.	
4.4 CITY-ST-ZIP	St. Petersburg, Fl. 33710	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Panco, Dorothy	
5.3 STREET ADDRESS	4560 Overlook Dr. NE	
5.4 CITY-ST-ZIP	St. Petersburg, Fl. 33703	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Parks, Ida E.	
6.3 STREET ADDRESS	2690- 57th St. N.	
6.4 CITY-ST-ZIP	St. Petersburg, Fl. 33710	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

14. 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 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, or on an attachment with an address.

SIGNATURE: Lou Vanderbleek Lou Vanderbleek DATE: Feb 10, 1998 (813) 898-0557

CR2E037 (10/97)