NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State
DIVISION OF CORPORATIONS

1999

## DOCUMENT # N9700000727

1. Corporation Name

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

Principal Place of Business

% LOU VANDERBLEEK 273 BAYVIEW DR NE ST PETERSBURG FL 33704-2428 Mailing Address

% LOU VANDERBLEEK 273 BAYVIEW DR NE ST PETERSBURG FL 33704-2428

## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90029 041 \*\*\*\*61.25



1				
	lace of Business 2a. Mailing Addr	"	L.Roc	3. Date incorporated or Qualifed  02/10/1997
Suite Apt.			F-110C	4. FEI Number Applied For
<b>└</b>			20.1	59-3465477 Not Applicable
22 156		our,	DKATA,	\$8.75 Additional
City & State	uncton Beach 28 Bedine	HON B.	ch, 72	5. Certificate of Status Desired Fee Required
Zip Country FL Zip Country				6. Election Campaign Financing \$5.00 May Be
24 B 370 8 - 25 Pinellas 29 337 08-1130 30 Tienellas				Trust Fund Contribution Added to Fees
173 09. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
VANDERBLEEK, LOU  81 Name Cady S J Rock  82 Street Address (P.O. Boy Humber is Not Acceptable)				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				5630 CWA BUTC
2/3 DATVIEW DRIVE				1: ( (2)
ST PETERSBURG FL 33704			ungton Black	
			84 City	((   FL   85   Zip Code   33768-17
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.				
U = U = U = U = U = U = U = U = U = U =				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  ATE				
12,	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		ELETE	1.1 TITLE	ST Vice President Change Addition
NAME	VANDERBLEEK, LOU		1.2 NAME	DOROTHY RUSCH 624 quintana Place n.E.
	273 BAYVIEW DR NE		1.3 STREET ADDRESS	624 Quintana Place n.E.
STREET ADDRESS			i i	ST. Petersburg, FL 33703-3128
CITY-ST-ZIP	ST PETERSBURG BEACH FL 33704		1.4 CITY-ST-ZIP	Partide A III and Schange Addition
TITLE	_		2.1 TITLE	
NAME	ROCK, GLADYS I		2.2 NAME	Rock, Gladys L.
- STREET ADDRESS	15630 GULF BLVD	6-44 <del></del>	2.3 STREET ADDRESS	Cane
CITY-ST-ZIP	REDINGTON BCH FL 33708		2.4 CITY-ST-ZIP	
TITLE	<b>VD</b> □ □	ELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	HUDSON, EARLINE		3.2 NAME	
STREET ADDRESS	4601 CHANCELLOR ST	0.4	3.3 STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL 33703		3.4. CITY-ST-ZIP	
TILE				Treasurer Change Addition
NAME	HART, JEANCAROL		4.2 NAME	Treascirer Achange Addition Hart, JeanCarol
STREET ADDRESS	6550 - 2ND AVE N		4.3 STREET ADDRESS	
l t	ST PETERSBURG FL 33710		4.4 CITY-ST-ZIP	Same
CITY-ST-ZIP	S PETEROBURG FL 33710		5.1 TITLE	Secretary   Change   Addition
l			5.2 NAME	MARY ELLEN LAMB
NAME	PANCO, DOROTHY		5.3 STREET ADDRESS	4550 YARDLEY AVE NO
STREET ADDRESS	4560 OVERLOOK DR NE			ST- Petersburg, 7l 33713
CITY-ST-ZIP	ST PETERSBURG FL 33703		5.4 CITY-ST-ZIP 6.1 TITLE	2 nd Vice Prodest Change Addition
TATLE	, ·		i i	Z. I (1.000 - 1.0)
NAME	PARKS, IDA E		6.2 NAME	MARJORIE FARINA
STREET ADDRESS	2690 - 57TH ST N	•	6.3 STREET ADDRESS	4825 DEL RIO WAY SO

CITY-ST-ZIP ST PETERSBURG FL 33710

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, with all other like empowered.

SIGNATURE: GLASIBINASTURER SEQUERED LLAR SIGNATURE (721) 392-4500