2000 UNIFORM BUSINESS REPORT (UBR)

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FILED
Jun 23, 2000 8:00 am
Secretary of State
05-22-2000 90003 048 ****61.00
06-23-2000 90103 038 ******.25

DOCUMENT # N97000003532

1. Entity Name

OCALA/MARION COUNTY CHAPTER OF THE WOMEN'S COUNC

Principal Place of Business	Mailing Address
3105 NE 14TH STREET OCALA FL 34470	3105 NE 14TH STREET OCALA FL 34470-4813

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number NOT APPLICABLE ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MEADOWS, SHERRI 3105 NE 14TH STREET OCALA FL 34470	Name: Krystin Bennett Street Address (P.O. Box Number is Not Acceptable): 2226 E. Silver Springs Blvd City: Ocala FL Zip Code: 34470

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.

SIGNATURE: Krystin Bennett 4-10-00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD REILLY, LISA 1130 NE 4 ST OCALA FL 34470	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Jay Wetherington D 115 NE 5th Ave Ocala, FL 34470	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KETCHIE, PAT 13388 N HWY. 19 SALT SPRINGS FL 32134	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Bateman, Karen D Ocala FL	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD GATTI, PAMELA 7681 NW US HWY 27 OCALA FL 34482	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President-Elect Holder, Elizabeth D P.O. Box 830056 Ocala FL 34478	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BENNETT, KRYSTIN 8926 SW 27 AVE OCALA FL 34476	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Bennett, Krystin D 2226 E. Silver Springs Blvd Ocala FL 34470	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

12. 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 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: Krystin Bennett 4-10-00 352-732-8350
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #