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NONPROFIT CORPORATION ANNUAL REPORT



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

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1996

SIGNATURE:

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WOMEN'S AUXILIARY OF THE MORSE GERIATRIC CENTER,

Principal Plac	e of Business	Mailing Address				j 100/HISY 15% 61087 HRIQL 61/HS (1	HER NIK BIBIL EIG	44 B P F F B B	1 8 1 8 1 6 17 17 1 13 6 1	
4847 FRED GLADSTONE MEMORIAL DR. WEST PALM BEACH FL 33417 4847 FRED GLADSTONI WEST PALM BEACH FL						The state of the s				
-					3.	Date Incorporated or Qualified 04/28/1992		ite of Last 03/02/1	Report	
_	Place of Business	28. Mailing Addr	ess		4.	FEI Number			Applied For	
1 Suito Ant	ш	26	·			65-0329966			Not Applicable	
Suite, Apt.	. #, etc.	Suite, Apt. #,	, etc.		Б.	Certificate of Status Desired			5 Additional	
City & Stat	le	City & State						Fee	Required	
3		28				Election Campaign Financing	D		O May Be	
Zip	Country	Zip	Cour	ntry		Trust Fund Contribution			d to Fees	
4	25	29	30	y		This corporation has liability for Florida Statutes	rintangible ta Yes 🔀		. 199.032,	
	Name and Address of Current	nt Registered Agent				Name and Address of New				
				81 Name						
	NHEIMER, E. DREW		-	B2 Street	Address (D.C	D. Box Number is Not Accepta	hte)			
	ED GLADSTONE MEMORIAL DR.			3000	Address (F.C	7. DOX NUMBER IS NOT ACCEPTA	IO(6)			
WEST P	ALM BEACH FL 33417		ļ7	83						
			<u>-</u>	84 City				· · · · · · ·		
			1				FL	1 1	p Code	
 Pursuant or register 	to the provisions of Sections 617,0502 red agent, or both, in the State of Floric	and 617.1508, Florida	Statutes, the abov	e-named co	orporation su	bmits this statement for the pu		nging its i	egistered offic	
0.109.510	red agent, or both, in the State of Florid ith, and accept the obligations of, Secti	ion 617.0503, Florida S	authorized by the co Statutes.	orporation's	board of dire	ectors. I hereby accept the app	pointment as	registered	l agent. I am	
tamılar wi										
IGNATURE .	Signature, typed or printed name of registered agen:		(NOTE: Registered A	gent signature re	equired when rein	stabng)	DATE			
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