

2001 UNIFORM BUSINESS REPORT (UBR)

4/1

FILED
Apr 20, 2001 8:00 am
Secretary of State

04-03-2001 90064 025 ****61.25

DOCUMENT # N07853

1. Entity Name

CEDAR KEY WOMAN'S CLUB, INC.

Principal Place of Business

2419 EAST HWY. 24
CEDAR KEY FL 32625

Mailing Address

P.O. BOX 116
CEDAR KEY FL 32625

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 631
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State
Cedar Key, FL 32625

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

CREASMAN, FRANCES
16550 HODGES AVENUE
CEDAR KEY FL 32625

7. Name and Address of New Registered Agent

Name

Millie Bayha

Street Address (P.O. Box Number is Not Acceptable)

16351 Shellcrest Av

City

Cedar Key,

FL

Zip Code
32625

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

Millie Bayha Pres.

Signature, typed or printed name of registered agent and FEI applicable.

(NOTE: Registered Agent signature required when reinstating)

3/30/01

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

TITLE	VP/D	☒ Delete
NAME	WALLING, GERRY	
STREET ADDRESS	941-7TH STREET	
CITY-ST-ZIP	CEDAR KEY FL 32625	
TITLE	T/D	☒ Delete
NAME	HARRIS, NENA	
STREET ADDRESS	67 S.W. PLACE HD RD	
CITY-ST-ZIP	CEDAR KEY FL 32625	
TITLE	S	☐ Delete
NAME	DRAKE, LOIS	
STREET ADDRESS	8040 F STREET	
CITY-ST-ZIP	CEDAR KEY FL 32625	
TITLE	P/D	☒ Delete
NAME	CREASMAN, FRANCES P	
STREET ADDRESS	16550 HODGES AVE.	
CITY-ST-ZIP	CEDAR KEY FL 32625	
TITLE	V	☐ Delete
NAME	CASEY, SUZANNE	
STREET ADDRESS	12151 S.W. 1065 TERRACE	
CITY-ST-ZIP	CEDAR KEY FL 32625	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Pres.	☐ Change ☒ Addition
NAME	Millie Bayha	
STREET ADDRESS	16351 SHELLCREST AV.	
CITY-ST-ZIP	Cedar Key, FL 32625	
TITLE	Dist.V.P.	☒ Change ☐ Addition
NAME	Suzanne Casey	
STREET ADDRESS	12151 S.W. 1065 Terrace	
CITY-ST-ZIP	Cedar Key, FL 32625	
TITLE	2nd.V.P.	☐ Change ☒ Addition
NAME	Janet Hendrix	
STREET ADDRESS	12870 Jernigan	
CITY-ST-ZIP	Cedar Key, FL 32625	
TITLE	Sec.	☐ Change ☐ Addition
NAME	Lois Drake	
STREET ADDRESS	8040 F Street	
CITY-ST-ZIP	Cedar Key, FL 32625	
TITLE	Tres.	☐ Change ☒ Addition
NAME	Nancy Reed	
STREET ADDRESS	7950 S.W. 132 Terr.	
CITY-ST-ZIP	CEDAR KEY, FL 32625	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Millie Bayha Pres. 3/30/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)