

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 29, 2004 8:00 am**  
**Secretary of State**

04-29-2004 90294 037 \*\*\*\*61.25

**DOCUMENT # N36823**

1. Entity Name

BOYNTON WOMAN'S CLUB



Principal Place of Business

1010 S FEDERAL HWY  
BOYNTON BEACH FL 33425  
US

Mailing Address

P.O. BOX 1135  
BOYNTON BEACH FL 33425

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

59-6134516

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

BUFFAN, LEONE A  
2563 SW 10TH STREET  
BOYNTON BEACH FL 33426

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D  
NAME BUFFAN, LEONE A ☒ Delete  
STREET ADDRESS 2563 SW 10TH ST  
CITY-ST-ZIP BOYNTON BEACH FL 33426

TITLE ~~PRESIDENT~~ ☒ Change ☐ Addition  
NAME Lillian Ostiguy  
STREET ADDRESS 10 SAILFISH LANE  
CITY-ST-ZIP Ocean Ridge FLA 33435

TITLE T  
NAME OSTIGUY, OSTIGUY ☒ Delete  
STREET ADDRESS 10 SAILFISH LANE  
CITY-ST-ZIP BOYNTON BEACH FL 33435

TITLE 1st Vice Pres. ☐ Change ☐ Addition  
NAME Eleanor Luongo  
STREET ADDRESS 37 Winchmore LN  
CITY-ST-ZIP Boynton Beach, FL 33426

TITLE D  
NAME CHIAVOLA, CAROLE J ☒ Delete  
STREET ADDRESS 1314 SW 15TH ST  
CITY-ST-ZIP BOYNTON BEACH FL 33426

TITLE 2nd Vice Pres ☒ Change ☐ Addition  
NAME Carole Andrade  
STREET ADDRESS 1314 SW 15 St  
CITY-ST-ZIP Boynton Beach FL 33426

TITLE S  
NAME ZIMMERMAN, LILLIAN ☒ Delete  
STREET ADDRESS 811 SW 18TH CT  
CITY-ST-ZIP BOYNTON BEACH FL 33426

TITLE Treas. ☒ Change ☐ Addition  
NAME Eleanor Veeland  
STREET ADDRESS 18 Holly Dr  
CITY-ST-ZIP Boynton Beach FL 33436

TITLE V  
NAME LUONGO, ELEANOR ☒ Delete  
STREET ADDRESS 37 WINCHMORE LN.  
CITY-ST-ZIP BOYNTON BEACH FL 33426

TITLE Secretary ☒ Change ☐ Addition  
NAME Norma Barken  
STREET ADDRESS 5715 Fairway Pk Dr, #102  
CITY-ST-ZIP Boynton Beach FL 33437

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Lillian M. Ostiguy* Pres. Lillian M. Ostiguy 4/21/04 561-734-6849