#### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 710264** 

Entity Name: FORT LAUDERDALE WOMAN'S CLUB, INC.

FILED Mar 01, 2017 Secretary of State CC7657544537

# **Current Principal Place of Business:**

20 S ANDREWS AVE FT LAUDERDALE. FL 33301

# **Current Mailing Address:**

PO BOX 2487

FORT LAUDERDALE. FL 33303 US

FEI Number: 59-0673290 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

SMITH, JO ANN 620 TENNIS CLUB DRIVE APT 110

FORT LAUDERDALE, FL 33311 US

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: JO ANN SMITH 03/01/2017

Electronic Signature of Registered Agent Date

### Officer/Director Detail:

Title PRESIDENT Title CORRESPONDING SECRETARY

Name SMITH , JO ANN Name KUNKEL , MARIANA

Address 620 TENNIS CLUB DRIVE, #110 Address 813 SW 16 ST

City-State-Zip: FORT LAUDERDALE FL 33311 City-State-Zip: FORT LAUDERDALE FL 33315

Title VP Title 2VP

NameMINOTT, DONNALEENameNOBLE, MINDYAddress1144 NW 7TH TERRACEAddress1101 NE 18TH

City-State-Zip: FORT LAUDERDALE FL 33311 City-State-Zip: FORT LAUDERDALE FL 33304

Title SECRETARY

Name GIBBONEY , LINDA Title TREASURER

Name POSTYN, LINDA

Address 1700 NW 7TH TERRACE Address 900 SW 12TH STREET

City-State-Zip: FORT LAUDERDALE FL 33311 City-State-Zip: FORT LAUDERDALE FL 33315

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JO ANN SMITH

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

03/01/2017