

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 710264

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

**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**

**04/23/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT	Title	CORRESPONDING SECRETARY
Name	SMITH, JO ANN	Name	MINOTT, DONNALEE
Address	620 TENNIS CLUB DRIVE, #110	Address	1144 NW 7TH TERRACE
City-State-Zip:	FORT LAUDERDALE FL 33311	City-State-Zip:	FORT LAUDERDALE FL 33311
Title	VP	Title	2VP
Name	ELLIS, EUGENIA D	Name	POSTYN, LINDA
Address	429 S.E. 13TH STREET	Address	1314 E. LAS OLAS 214
City-State-Zip:	FORT LAUDERDALE FL 33316	City-State-Zip:	FORT LAUDERDALE FL 33301
Title	SECRETARY	Title	TREASURER
Name	KOSINSKI, ASHLEY	Name	PYROR, JERRI
Address	1920 N. E. 1ST TERRACE H203	Address	1208 CITRUS ISLE
City-State-Zip:	WILTON MANORS FL 33305	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**

**PRESIDENT**

**04/23/2015**

Electronic Signature of Signing Officer/Director Detail

Date