

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 719190

**Entity Name:** NORTHWEST FEDERATED WOMANS CLUB OF BROWARD COUNTY, INC.

**FILED**  
**Mar 07, 2023**  
**Secretary of State**  
**1933239671CC**

**Current Principal Place of Business:**

2161 N.W. 19TH STREET  
FT LAUDERDALE, FL 33311

**Current Mailing Address:**

P.O. BOX 5622  
FT LAUDERDALE, FL 33310-5622 US

**FEI Number: 23-7113192**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BONAPARTE, TOWANA  
2161 NW 19TH STREET  
FT. 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            ACTING SECRETARY  
Name            THOMPSON, LATOYA  
Address        2161 NORTHWEST 19TH STREET  
City-State-Zip: FORT LAUDERDALE FL 33311

Title            TREASURER  
Name            BATTLE, MOZELL  
Address        2161 NORTHWEST 19TH STREET  
City-State-Zip: FORT LAUDERDALE FL 33311

Title            PARLIAMENTARIAN  
Name            SAUNDERS, CORRINE  
Address        2161 NORTHWEST 19 STREET  
City-State-Zip: FORT LAUDERDALE FL 33311

Title            HISTORIAN  
Name            MCELVY, JULIA  
Address        2161 NORTHWEST 19 STREET  
City-State-Zip: FORT LAUDERDALE FL 33311

Title            P  
Name            BONAPARTE, TOWANA  
Address        2161 NW 19TH STREET  
City-State-Zip: FT. LAUDERDALE FL 33311

Title            V  
Name            MCELVY, JULIA  
Address        2161 NW 19TH STREET  
City-State-Zip: FT. LAUDERDALE FL 33311

*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: TOWANA BONAPARTE**

**PRESIDENT**

**03/07/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date