

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000010369

**Entity Name:** FRANCES J. BRIGHT WOMAN'S CLUB CHARITABLE FOUNDATION, INC.

**FILED**  
**Apr 29, 2022**  
**Secretary of State**  
**2918151594CC**

**Current Principal Place of Business:**

2305 SW 35TH AVENUE  
DELRAY BEACH, FL 33445-6666

**Current Mailing Address:**

P.O. BOX 6273  
DELRAY BEACH, FL 33482 US

**FEI Number: 47-5471447**

**Certificate of Status Desired: No**

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

GARY, BAINE  
7865 SPRINGDALE DR.  
LAKE WORTH, FL 33467 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: GARY BAINE**

**04/29/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           PRYOR, CHARMAINE  
Address        3443 PLACE VALENCAY  
City-State-Zip: DELRAY BEACH FL 33467

Title           DIRECTOR  
Name           WRIGHT, KAY  
Address        1 ELTON PLACE  
City-State-Zip: BOYNTON BEACH FL 33426

Title           D  
Name           PARKER, LILLIE  
Address        730 CHATELAINE BLVD.  
City-State-Zip: DELRAY BEACH FL 33444

Title           P  
Name           BAINE, GARY  
Address        7865 SPRINGDALE DR.  
City-State-Zip: LAKE WORTH FL 33467

Title           D  
Name           PAUL, REGINA  
Address        4951 GRINNELL STREET  
City-State-Zip: LAKE WORTH FL 33463

Title           DIRECTOR  
Name           BALDWIN, KAREN  
Address        106 N. ROBBINS DRIVE  
City-State-Zip: WEST PALM BEACH FL 33409

Title           VP  
Name           JOHNSON-GRAHAM, ANGELA  
Address        644 CORAL WAY  
City-State-Zip: 644 CORAL WAY FL 33445

Title           OFFICER  
Name           WITHERSPOON, MIA  
Address        2729 SW 11TH STREET  
City-State-Zip: BOYNTON BCH FL 33426

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*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: GARY BAINE**

**PRESIDENT**

**04/29/2022**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title SECRETARY  
Name BOWERS-ROBINSON, MARILYN  
Address 243 NW 14TH AVE  
City-State-Zip: DELRAY BCH FL 33444

Title OFFICER  
Name JACKSON, LAWANNA  
Address 1 RIPLEY WAY  
City-State-Zip: BOYNTON BCH FL 33426

Title OFFICER  
Name BROADNAX, EULA  
Address 712 GOLF COURT  
City-State-Zip: DELRAY BCH FL 33445

Title DIRECTOR  
Name ALLEN, RAMONA  
Address 6933 N CALUMET CIRCLE  
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR  
Name IVY-HOLNESS, MARLA  
Address 340 SW 5TH AVENUE  
City-State-Zip: DELRAY BCH FL 33444

Title DIRECTOR  
Name MOBLEY, DEBRA  
Address 622 NW 11TH STREET  
City-State-Zip: BOYNTON BCH FL 33426

Title DIRECTOR  
Name WILLIAMS-ZANDERS, CINDY  
Address 1019 LONGPORT CIRCLE UNIT-B  
City-State-Zip: DELRAY BEACH FL 33444

Title OFFICER  
Name ROLLE, SHERRY  
Address 202 SW 9TH COURT  
City-State-Zip: DELRAY BCH FL 33444

Title OFFICER  
Name BLACK, NAOMI  
Address 2590 ANGLER DRIVE  
City-State-Zip: DELRAY BCH FL 33445

Title OFFICER  
Name HART, NADINE  
Address 205 MARTIN LUTHER KING BLVD  
City-State-Zip: DELRAY BCH FL 33444

Title DIRECTOR  
Name ELLIS, DIEDRA  
Address 2133 NE 1ST STREET  
City-State-Zip: BOYNTON BCH FL 33435

Title DIRECTOR  
Name HUDSON, ADDIE  
Address 7319 VIALE ANGELO  
City-State-Zip: DELRAY BCH FL 33446

Title DIRECTOR  
Name SIMS, KAREN  
Address 8561 WINFALL DRIVE  
City-State-Zip: BOYNON BCH FL 33472