

**2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000004303

**Entity Name:** WOMEN'S SENIOR GOLF ASSOCIATION, INC.

**Current Principal Place of Business:**

1340 SOLDIERS FIELD ROAD  
SUITE 4  
BOSTON, MA 02135

**Current Mailing Address:**

1340 SOLDIERS FIELD ROAD  
SUITE 4  
BOSTON, MA 02135

**FEI Number:** 58-2546779

**Certificate of Status Desired:** Yes

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

SMITH, DANIEL  
1555 PALM BEACH LAKE BLVD.  
SUITE 900  
WEST PALM BEACH, FL 33401 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           TREASURER  
Name           IVERSON, BECKY  
Address        4723 POPLAR CREEK DR  
City-State-Zip: MADISON WI 53718

Title           PRESIDENT  
Name           BURKS, AUDRA  
Address        2213 CLAREMONT DRIVE  
City-State-Zip: SPRINGFIELD IL 62703

Title           CORRESPONDING SECRETARY  
Name           OSACHUK, JEAN  
Address        1340 SOLDIERS FIELD ROAD  
                  SUITE 4  
City-State-Zip: BOSTON MA 02135

Title           SECRETARY  
Name           GALLAGHER - SMITH, JACKIE  
Address        193 PARADISE CIRCLE  
City-State-Zip: JUPITER FL 33458

Title           VP  
Name           BUNCH, ASHLI  
Address        1442 DARBEE DR  
City-State-Zip: MORRISTOWN TN 37814

Title           DIRECTOR  
Name           CHEN, LINDA  
Address        8826 TROUT ROAD  
City-State-Zip: ORLANDO FL 32836

Title           DIRECTOR  
Name           CATHY, HARBIN  
Address        225 35TH STREET SE  
City-State-Zip: PARIS TX 75460

*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:** JEAN OSACHUK

**CORRESPONDING  
SECRETARY**

**01/26/2024**

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

\_\_\_\_\_  
Date