2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 18, 2005 8:00 am **Secretary of State DOCUMENT # 700713** 1. Entity Name 02-18-2005 90061 007 ****61.25 THE ORMOND BEACH WOMAN'S CLUB, INC. Principal Place of Business Mailing Address **42 NORTH BEACH STREET** 102 SEVILLE ST ORMOND BEACH FL 32174-5638 ORMOND BEACH FL 32174-5638 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/04) City & State City & State Applied For 4. FEI Number 59-0799309 Not Applicable Žip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CONWAY, LOUIS E. Street Address (P.O. Box Number is Not Acceptable) 170 E. GRANADA BLVD ORMOND BEACH FL 32074 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Due By May 1, 2005 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TITLE Delete TITLE ANNA SANEGUTWEIN PHELPS, SHARON NAME NAME 9 PINE SHADOW TR. ORMOND BEACH, FL 32174 166 DOQULNA KAY RD STREET ADDRESS STREET ADDRESS ORMOND BEACH FL 32176 CITY-ST-ZIP CITY-ST-ZIP TITLE Defete TITLE FERRELL, BEVERLY NAME NAME 307 TINDERLINE TRAIL 60 BIG BUCK TRAIL STREET ADDRESS STREET ADDRESS ORMOND BEACH FL. CITY-ST-ZIP CITY-ST-ZIP Of moud BEACH, FA 32/1 Delete TITLE TITLE ☐ Addition HUBNER, THERESA NAME NAME 188 FAIRWAY DRIVE STREET ADDRESS_ STREET ADDRESS ORMOND BEACH FL CITY-ST-7(P CITY-ST-7IP DE AN CRAWFORD 14 ISLAND CAY DR ORMOND BEACH, FL 32176 IIII F Defete TITLE ☐ Change FORBES, WILMA NAME NAME 25 NASNASO DR STREET ADDRESS STREET ADDRESS ORMAND BEACH FL 32474 CITY-ST-7IP CITY-ST-ZIP THLE ☐ Delete TITLE ☐ Addition SCHWIEG, PHYLLIS NAME NAME 4 WINDSOR DR. STREET ADDRESS STREET ADDRESS ORMOND BEACH FL 32174 CITY-ST-ZIP CITY-ST-7IP TITLE TITLE **120** Delete BRUNO, FRANCIS NAME NAME 1321 DEER LAKE CIR STREET ADDRESS STREET ADDRESS ORMOND BEACH FL 32174 CITY-ST-ZIP CITY-ST-ZIP

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

THERESA HUERNER