2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #706371 1. Entity Name
THE FORT MYERS BEACH WOMAN'S CLUB



FILED Apr 05, 2006 8:00 am Secretary of State

04-05-2006 90142 042 ****61.25

INCORPOATED								
175 STERLING AVENUE PO		Mailing Address PO BOX 22 FT MYERS BEACH, FL 33931 US		yv	v -			
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03132006 Cr	ng-NP CR2E037	(11/05)		
City & State		City & State		4. FEI Number 59-613378	5	 ` `	plied For Applicable	
Zip	Country	Zip	Country	5. Certificate of St.		8.75 Addi		
	6. Name and Address of Current Ro	egistered Agent		7. Name and Add	ress of New Registered Ag	gent		
PEDERSON,KJELL			Name	Name				
2555 ESTE	ERO BLVD. S BCH, FL 33931		Street Addr	ess (P.O. Box Number is I	Not Acceptable)			
	•							
			City		FL	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.							and accept	
the obligations of registered agent.								
SIGNATURE .			<u> </u>					
	Signature, typed or printed came of registered agent and	d title d applicable. (NOTE: I	Registered Agent signature ra	equired when reinstating)	DATE			
Filing Fee is \$61.25 Due by May 1, 2006		Floation Comm	9. Election Campaign Financing Trust Fund Contribution.		Make check	navahla ta		
				\$5.00 May Be Added to Fees	Florida Departr			
10.		Trust Fund Co		Added to Fees		nent of St	ate	
TITLE	Due by May 1, 2006 OFFICERS AND DIRE	Trust Fund Co	11. TITLE	Added to Fees	Florida Departr	nent of St	ate	
	Due by May 1, 2006 OFFICERS AND DIRE	Trust Fund Co	ntribution.	Added to Fees	Florida Departr	nent of Sta	ate 10	
TITLE NAME	OFFICERS AND DIRE VD SAUNDERS, SALLY	Trust Fund Co	11. TITLE NAME	Added to Fees	Florida Departr	nent of Sta	ate 10	
NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2006 OFFICERS AND DIRE VD SAUNDERS, SALLY 12 ARENIDA CARITA FORT MYERS BEACH, FL 33931 PD	Trust Fund Co	11. TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees	Florida Departr	nent of Sta	ate 10	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Due by May 1, 2006 OFFICERS AND DIRE VD SAUNDERS, SALLY 12 ARENIDA CARITA FORT MYERS BEACH, FL 33931 PD KEENE, BARBARA	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees	Florida Departr	nent of Sta	ate 10 Addition	
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interept certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE AND TYPED OR PRINTED RAME OF SIGNING OFFICER OR DIRECTOR