2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2004 08:00 AM
Secretary of State

DOCUMENT # 710998

1. Entity Name
WOMAN'S CLUB OF DEERFIELD BEACH, INC.

Principal Place of Business	Mailing Address
910 E. HILLSBORO BOULEVARD DEERFIELD BEACH, FL 33441 US	910 E. HILLSBORO BOULEVARD DEERFIELD BEACH, FL 33441 US

01062004 No Chg-NP CR2E037 (10/03)

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4. FEI Number
59-1009533

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WELLS, MYRA
777 SE 2ND AVE., APT 209B
DEERFIELD BEACH, FL 33441

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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 Myra R. Wells Pres. MYRA R. WELLS JAN. 6, 2004
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	WELLS, MYRA
STREET ADDRESS	777 SE 2ND AVE., APT 209B
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441
TITLE	AD
NAME	FREEMAN, CAROLINE
STREET ADDRESS	401 NE 19TH AVE., #17
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441
TITLE	1VP
NAME	MCGEARY, MARTHA
STREET ADDRESS	1442 SE 6TH ST.
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441
TITLE	TD
NAME	THOR, FRAN K
STREET ADDRESS	2905 WATERFORD DR N
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442
TITLE	A
NAME	MCKENNA, MARY
STREET ADDRESS	3367 ALBA WAY
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/12/04-80024-014 70.00

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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.

SIGNATURE: Fran H. Thor FRAN H. THOR, TREAS. 1/6/04 (954) 428-3030
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #