

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90274 018 ****61.25

DOCUMENT # 712719

1. Corporation Name

WOMAN'S CLUB OF WELAKA, INC.

Principal Place of Business

HWY 309
WELAKA FL 32193
US

Mailing Address

P O BOX 154
WELAKA FL 32193
US



2. Principal Place of Business

21 Hwy 309
Suite, Apt. #, etc.

2a. Mailing Address

26 P.O. Box 154
Suite, Apt. #, etc.

3. Date Incorporated or Qualified

05/10/1967

4. FEI Number

59-6205648

Applied For

Not Applicable

23 City & State

WELAKA, FL

27 City & State

WELAKA, FL

24 Zip

32193

25 Country

PUTNAM

29 Zip

32193

30 Country

PUTNAM

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

MARY C PIDGEON
H C 2 BOX 380-F
119 PUTTER LN (FRUITLAND, FL)
CRESCENT CITY FL 32112

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME JOYCE DEPRE
STREET ADDRESS 123 ANDERSON DR
CITY-ST-ZIP POMONA PARK FL 32181

TITLE VP
NAME CLARA MALOY
STREET ADDRESS 430 PLANTATION PINES DR
CITY-ST-ZIP GEORGETOWN FL 32193

TITLE DVP
NAME SCHULMISTER, MARIE
STREET ADDRESS H C 2 BOX 316 (202 S HAYES)
CITY-ST-ZIP CRESCENT CITY FL 32112

TITLE VP
NAME JUDY SLATKOWSKI
STREET ADDRESS RT 1 BOX 703 (@) LAKE COMO DR
CITY-ST-ZIP POMONA PARK FL 32181

TITLE DT
NAME MARY C PIDGEON
STREET ADDRESS BOX 380-F (119 PUTTER LN, FRUITLAND, FL)
CITY-ST-ZIP PLANT CITY FL 32119

TITLE
NAME NORMA COKINS
STREET ADDRESS 250 BUFFALO BLUFF RD # 218
CITY-ST-ZIP SATSUMA, FL, 32189

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRES. DIRECTOR ☐ Change ☐ Addition
1.2 NAME JOYCE DEPRE
1.3 STREET ADDRESS 123 ANDERSON DR
1.4 CITY-ST-ZIP POMONA PARK FL, 32181

2.1 TITLE 1ST V.P. TRUSTEE ☐ Change ☐ Addition
2.2 NAME CLARA MALOY
2.3 STREET ADDRESS 430 PLANTATION PINES DR
2.4 CITY-ST-ZIP GEORGETOWN, FL, 32139

3.1 TITLE TRUSTEE 3RD V.P. ☐ Change ☐ Addition
3.2 NAME MARIE SCHULMEISTER
3.3 STREET ADDRESS H C 2 BOX 316 (202 S. HAYES)
3.4 CITY-ST-ZIP CRESCENT CITY, FL, 32112

4.1 TITLE TRUSTEE 2ND V.P. ☐ Change ☒ Addition
4.2 NAME ROSEMARY ANDERSON
4.3 STREET ADDRESS P.O. BOX 1343
4.4 CITY-ST-ZIP WELAKA, FL, 32193

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE TREAS. DIRECTOR ☐ Change ☒ Addition
6.2 NAME NORMA COKINS
6.3 STREET ADDRESS 250 BUFFALO BLUFF RD # 218
6.4 CITY-ST-ZIP SATSUMA, FL, 32189

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-99

Date

904-649-8459

Daytime Phone #

CR2E037 (11/98)

0076098