

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morikson  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 716344

(7)

1. Corporation Name

WOMEN'S CHAMBER OF COMMERCE OF THE GREATER GULF  
BEACHES, INC.

Principal Place of Business

Mailing Address

429 88TH AVE., ST. PETE BCH., FL 33706  
P.O. BOX 9206  
TREASURE ISLAND FL 33740

P.O. BOX 47402  
ST. PETERSBURG FL 33743



3. Date Incorporated or Qualified

04/10/1969

4. FEI Number

59-6189461

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WOLFE, JEAN MARIE  
255A 110TH AVENUE  
TREASURE ISLAND FL 33706

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 NAME STREET ADDRESS CITY-ST-ZIP

P SAWYER134CAN  
10063 S YACHT CLUB DRIVE  
TREASURE ISLAND FL

☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SRD TATE, BETTY  
7891 COQUINA WAY  
ST PETERSBURG BCH FL 33706

☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TD WESTBURY, CAROLINE  
1900 88TH ST NO #306  
ST PETERSBURG FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D BUZZA, DITTY  
4724 OVERLOOK DR NE  
ST. PETERSBURG FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

PRESIDENT  
NANCY FREDERICH  
1 KEY CAPRI #702E  
TREASURE ISLAND, FL 33706

☒ Change ☐ Addition

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

RECORDING SECRETARY  
JEANNE KILMER  
4212 POINSETTIA DR.  
ST. PETERSBURG BEACH, FL 33706

☒ Change ☐ Addition

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

TREASURER  
CAROLINE WESTBURY  
1900 88th St. No #306  
ST PETERSBURG FL 33710

☐ Change ☐ Addition

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

☐ Change ☐ Addition

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

☐ Change ☐ Addition

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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.

SIGNATURE: *Caroline Westbury*

2/16/98

381 4288

CR2E037 (10/97)