FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1997 8:00am

Secretary of State

Sandra B. Morijam

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # 718738

(8)

ALTRUSA CLUB OF ST. AUGUSTINE, INC.				 		
Principal Plac	e of Business	Mailing Address			AN TOTA MINTO MEDEL BADAT MINTO NANDI USDLE 1801	
P.O. BOX 3372 P.O. BOX 3372 P.O. BOX 3372 ST, ALGUSTINE FL 82084 ST. AUGUSTINE FL 82084			22			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				3. Date Incorporated or Qualifie 06/22/1970	d 3a, Date of Last Report 03/20/1996	
} 	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 #	# -A-	Suite, Apt. #, etc.		59-6150976	Not Applicable	
Suite, Apt.	#, BIC.	27 Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	6 3	City & State		6. Election Campaign Financing Trust Fund Contribution		
Zip	Country	Zip	Country		for intangible tax under s. 193,032,	
24	25		30	Florida Statutes	☐ Yes ☐ No	
2 <u>2</u>	9. Name and Address of Curren	nt Registered Agent	81 Name	10. Name and Address of New	Registered Agent	
81				Mary L'Engle Sears	:	
PLANT CHRISTINE T.			B2 Street	B2 Street Address (P.O. Box Number is Not Acceptable)		
35	ST POPE RD		83	714 Saco Court		
FID1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
מעח יון			84 City	St. Augustine	FL 32086	
11. Pursuant	to the provisions of Sections 617,050	2 and 617.1508, Florida Statutes	s, the above-named	corporation submits this statement for th	e purpose of changing its registered	
agent. I s	registered agent, or both, in the State am familiar with, and accept the obligi	ations of, Section 617.0503, Flor	itriorized by the corrida Statutes.	corporation submits this statement for the poration's board of directors. I hereby ac	cept the appointment as registered	
SIGNATURE	Christine VI	Plant reg ages	st Ca	ustine T. Cland	4/30/97	
√12. E	Signature, typed or printed name of registered age OFFICERS AN		Registered Agent signature		FICERS AND BIRECTORS IN 12	
atitle 40	D	DELETE	1.1 TITLE		Change Addition	
NAME 1	PLANT, CHRISTINE		1.2 NAME	Director Nancy Watts	ļį.	
STREET ADDRESS	700 W. POPE RD. #L91		1.3 STREET ADDRESS	643 Nieves Lane	į	
CITY-ST-EIP	ST. AUGUSTINE FL 32084	hal DELETE	1.4 CITY-ST-ZIP	St. Augustine, Fl.	32086 Change ZXddition	
NAME **	ELLEN CIMICATO	X DELETE	2.1 TITLE 2.2 NAME	Director	Change 23 40 dillion	
STREET ADDRESS	241 COQUINA AVE		2.3 STREET ADDRESS	Mary Ann Milar		
CITY-ST-ZIP	ST AUGUSTINE FL		2. 4 CITY-ST-ZIP	656 Christina Dri	ve	
TITLE	PD	DELETE	3.1 TITLE	St. Augustine, FL	32086 Change Addition	
NAME	ZELLNER, VICKI		3.2 NAME			
STREET ADDRESS	60 COMARES AVE.		3.3 STREET ADDRESS			
CITY-ST-ZIP	ST AUGUSTINE FL 32084	★ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition	
NAME 1	JOCELYN MICKLOVITCH	MT become	4.1 TILE 4.2 NAME		Change Zoullon	
STREET ADDRESS	3841 LAUREL AVE		4.3 STREET ADDRESS			
City-St-Zip	ST, AUGUSTINE FL		4.4 City - ST - ZIP		ĺ	
TITLE	T	☐ DELETE	5.1 TITLE		Change Addition	
NAME	ANGYALFY, JOAN		5.2 NAME			
STREET ADDRESS	288 SAN AUGIALFY		5.3 STREET ADDRESS		ļ	
OTY-ST-DEP	STAUGUSTINE FL	DELETE	5.4 CITY-ST-ZIP	 	Change Addition	
TITLE T		C DECEIE	6.1 TITLE 6.2 NAME		The control of the state of the	
TREET ADDRESS	l for		6.3 STREET ADDRESS		i	
ny st			6.4 CITY-ST-ZIP		ĺ	
Takkara	hu and he that the Information auntilia	al codete etala ditta a alama and a salid	£ - 44 +	total in Caption 110 07(9)(i) Florida Otal	dea I forther partification the	

do 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