

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90051 032 ****61.25

DOCUMENT # 723208

1. Entity Name
JUNIOR WOMAN'S CLUB OF BOCA RATON, INC



Principal Place of Business
**1661 S.W. 7TH AVE.
BOCA RATON FL 33486
US**

Mailing Address
**P.O. BOX 1005
BOCA RATON FL 33432
US**



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
City & State

Zip
Country

Zip
Country

1st MOORE CR2E037 (10/05)

4. FEI Number
59-1828126

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
**MORESCHI, MARIA C
1398 SW 1 STREET
BOCA RATON FL 33486**

7. Name and Address of New Registered Agent
Name
Charlotte R. Lewis
Street Address (P.O. Box Number is Not Acceptable)
6812 Calle del Paz North
City
Boca Raton FL Zip Code
33433

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 Charlotte R. Lewis DATE 2/7/06

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when transferring)

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

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

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KALER, SUE 6031 VIA VENETIA NORTH DELRAY BEACH FL 33484 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Maria c. Moreschi 1398 SW 1 Street Boca Raton FL 33486 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SLIVKA, JOYCE 4801 NW 25TH WAY BOCA RATON FL 33434 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Cathy Moabery 10058 El Caballo Ct. Delray Beach, FL 33446 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MORESCHI, MARIA C 1398 SW 1 STREET BOCA RATON FL 33486 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Charlotte Lewis 6812 Calle del Paz N Boca Raton FL 33433 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RS BAGDASARIAN, PAM 1561 SW 21 LANE BOCA RATON FL 33498 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	RS Bonnie Wangner 21588 San Germaine Lane Boca Raton FL 33433 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CS HENNESSY, KRIS 810 NE 77TH STREET BOCA RATON FL 33487 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CS Pam Bagdasarian 1561 SW 21 Lane Boca Raton, FL 33498 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Maria C. Moreschi Maria C. Moreschi 2/8/06 561/394-0691