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

Mar 27, 2006 8:00 am Secretary of State **DOCUMENT # 726488** 03-27-2006 90260 018 ****61.25 THE WOMEN'S CLUB OF KENNETH CITY, INC. Principal Place of Business Mailing Address 6000 54TH AVENUE NORTH KENNETH CITY FL 33709-8806 6000 54TH AVENUE NORTH KENNETH CITY FL 33709-8806 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 23-7371487 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ALLEN, JOAN M Street Address (P.O. Box Number is Not Acceptable) 5820 43RD TERRACE NORTH #1404 KENNETH CITY FL 33709 Zip Code __ 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 Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. PIZZ CARMEN GOOD Change 4143 56 ST. NEW GOOD Change TITLE PD Delete HIY3 OU ST. N # 9000 Change [Kenneth CITY | FI. 33709 FRANCES H. LUKE KChange [5873 48 AVE N KENNETH CITY | FI 33709 TIRABASSI, FLORENCE NAME NAME 4300 58TH STREET NORTH #1809 STREET ADDRESS STREET ADDRESS KENNETH CITY FL 33709 CITY-ST-ZIP CITY-ST-ZIP TITLE V Delete TITLE PIZZI, CARMEN NAME NAME 4143 56TH ŠTN #900 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP KENNETH CITY FL 33709 CITY-ST-ZIP тик 🕰 🏠 SD Delota GREENFIELD, DOLLY NAME NAME 10901 JHONSON BLVD #J304 STREET ADDRESS STREET ADDRESS SEMINOLE FL 33772 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME ALLEN, JOAN NAME STREET ADDRESS 5820 43 TER N #1404 STREET ADDRESS CITY-ST-ZIP KENNETH CITY FL 33709 CITY-ST-ZIP TIRABASSI TITLE D TITLE Delete ☐ Addition GILL, CAROL MRS. NAME NAMÉ 6400 46TH AVE. N., APT 205 STREET ADDRESS STREET ADDRESS Kenneth City, FI. KENNETH CITY FL 33709-8806 CITY-ST-ZIP CITY-ST-ZIP TINA MASCIARELLISCHange DI 4020 55 ST. N # 178 Newweth City, Fl. 33709 Delete TITLE \mathcal{P} TULE KELLER, ESTHER NAME NAME 4152 55TH WAY N APT 1030 STREET ADDRESS STREET ADDRESS KENNETH CITY FL 33709 CITY-ST-ZIP

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

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if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED

3-15-06