

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 727553

1. Entity Name

WOMEN'S CIVIC CLUB OF SAFETY HARBOR, FLORIDA, IN

Principal Place of Business

Mailing Address

POST OFFICE BOX 1405
SAFETY HARBOR FL 34695-8405

POST OFFICE BOX 1405
SAFETY HARBOR FL 34695-1405

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-6522475

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DOW, ELNA
160 MEADOWLARK DRIVE
SAFETY HARBOR FL 34695

Name

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

City

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME HEDGES, RUTH
STREET ADDRESS 2367 D. FLANDERS WAY
CITY-ST-ZIP SAFETY HARBOR FL

TITLE D ☐ Change ☒ Addition
NAME BOTTIE, LIZ
STREET ADDRESS 214 Meadowcross, Safety Harbor FL
CITY-ST-ZIP 34695

TITLE ☐ Delete
NAME DOWNS, GERRI
STREET ADDRESS 1195 MISSION CIRCLE
CITY-ST-ZIP CLEARWATER FL 33759

TITLE T ☒ Change ☐ Addition
NAME Downs, Gerri
STREET ADDRESS 1095 Mission Circle
CITY-ST-ZIP Clearwater, FL 33759

TITLE D ☒ Delete
NAME MERRITT, ELIE
STREET ADDRESS 3240 SAN BERNADINO ST
CITY-ST-ZIP CLEARWATER FL

TITLE D ☐ Change ☒ Addition
NAME Earle, Bonnie
STREET ADDRESS 1776 St. Croix Drive
CITY-ST-ZIP Clearwater, FL 33759

TITLE P ☐ Delete
NAME DOW, ELNA L
STREET ADDRESS 160 MEADOWLARK DR
CITY-ST-ZIP SAFETY HARBOR FL 34695

TITLE S ☐ Change ☒ Addition
NAME Clark, Betty
STREET ADDRESS 355 Tucker Street
CITY-ST-ZIP Safety Harbor, FL 34695

TITLE D ☒ Delete
NAME HESS, DORIS
STREET ADDRESS 280 TUCKER ST
CITY-ST-ZIP SAFETY HARBOR FL

TITLE V ☐ Change ☒ Addition
NAME Schnatterer, Joan
STREET ADDRESS 55 Harbor Woods Circle
CITY-ST-ZIP Safety Harbor, FL 34695

TITLE P ☐ Delete
NAME HOOLIHAN, CHARLOTTE
STREET ADDRESS 2055 BROOKSIDE DR
CITY-ST-ZIP SAFETY HARBOR FL

TITLE P ☒ Change ☐ Addition
NAME Hoolihan, Charlotte
STREET ADDRESS 1736 Lake Cypress Drive
CITY-ST-ZIP Safety Harbor, FL 34695

12. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)