

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

FILED
Mar 14, 2006 8:00 am
Secretary of State

03-14-2006 90018 040 ****61.25

DOCUMENT # 735393

1. Entity Name

BROOKSVILLE WOMAN'S CLUB, INCORPORATED



Principal Place of Business

**131 SOUTH MAIN STREET
BROOKSVILLE FL 34601**

Mailing Address

**131 SOUTH MAIN STREET
BROOKSVILLE FL 34601**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

23-7034705

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

**PHILLIPS, W. C.
904 CEDAR DRIVE
BROOKSVILLE FL 34601**

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. I am familiar with, and accept the obligations of registered agent.

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
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

TITLE **V** ☒ Delete

NAME **PETRIE, SALLY**
STREET ADDRESS **23251 GOLDEN PHEASANT TRL**
CITY- ST- ZIP **BROOKSVILLE FL 34601**

TITLE **T** ☐ Delete

NAME **MLECKA, PHYLLIS**
STREET ADDRESS **20481 YONTZ RD**
CITY- ST- ZIP **BROOKSVILLE FL 34601**

TITLE **D** ☐ Delete

NAME **WILLIAMS, ORA**
STREET ADDRESS **3082 WESTLAND RD**
CITY- ST- ZIP **BROOKSVILLE FL 34601**

TITLE **D** ☐ Delete

NAME **LESH, GRACE**
STREET ADDRESS **929 COACHLIGHT LANE**
CITY- ST- ZIP **BROOKSVILLE FL 34601**

TITLE **PD** ☐ Delete

NAME **MCLAREN, BETTY ANN**
STREET ADDRESS **8472 PINWOOD AVE**
CITY- ST- ZIP **BROOKSVILLE FL 34613**

TITLE **S** ☐ Delete

NAME **SENGER, LETTY**
STREET ADDRESS **12327 CORONADO DRIVE**
CITY- ST- ZIP **SPRING HILL FL 34609**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **V** ☐ Change ☒ Addition

NAME **Cherry Stettin**
STREET ADDRESS **905 S. Mildred Avenue**
CITY- ST- ZIP **Brooksville, FL. 34601**

TITLE **T** ☒ Change ☐ Addition

NAME **604 W. Dr. ML.King, Jr. Blvd.**
STREET ADDRESS **Brooksville, FL 34601**

TITLE **T** ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE **T** ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE **T** ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE **T** ☐ Change ☐ Addition

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

SIGNATURE: Betty Ann McLaren Betty Ann McLaren

(352) 597-9829