

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$81.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED
Sep 08 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morham , Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **736365** (8)

1. Corporation Name

HOLLYWOOD WOMAN'S CLUB

Principal Place of Business

**501 N. 14TH AVENUE
HOLLYWOOD FL 33020-5209**

Mailing Address

**501 N. 14TH AVENUE
HOLLYWOOD FL 33020-5209**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/08/1976	3a. Date of Last Report 05/01/1996
4. FEI Number 59-6137224	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Zip
Country	Country
24	25
29	30

9. Name and Address of Current Registered Agent

**CAMILLO, CAROL ANN
1006 N. SOUTH LAKE DR
HOLLYWOOD FL 33019**

10. Name and Address of New Registered Agent

81 Name Leaman, Norma
82 Street Address (P.O. Box Number is Not Acceptable) 917 N. 17th Ave.
83
84 City Hollywood
85 Zip Code FL 33020

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

Norma Leaman

(NOTE: Registered Agent signature required when reinstating)

8/16/97

DATE

12. OFFICERS AND DIRECTORS	
TITLE	P ☒ DELETE
NAME	CAMILLO, CAROL
STREET ADDRESS	1006 N. SOUTH LAKE DR.
CITY-ST-ZIP	HOLLYWOOD FL
TITLE	V ☒ DELETE
NAME	SMITH, LEE
STREET ADDRESS	1948 WASHINGTON ST. #A
CITY-ST-ZIP	HOLLYWOOD FL
TITLE	☐ DELETE
NAME	MARSH, DOLETTE
STREET ADDRESS	131 SE 3RD AVE #104
CITY-ST-ZIP	DANIA FL
TITLE	☐ DELETE
NAME	HUTCHINSON, SYLVIA
STREET ADDRESS	401 SE 3RD ST #403
CITY-ST-ZIP	DANIA FL
TITLE	☐ DELETE
NAME	CHIARELLO, FEDRA
STREET ADDRESS	1025 SE 3RD AVE., BLDG 3 #302
CITY-ST-ZIP	DANIA FL
TITLE	☒ DELETE
NAME	LEVINE, MINNIE
STREET ADDRESS	1212 N PARK RD
CITY-ST-ZIP	HOLLYWOOD FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	P ☐ Change ☒ Addition
1.2 NAME	Leaman, Norma
1.3 STREET ADDRESS	917 N. 17th Ave.
1.4 CITY-ST-ZIP	Hollywood, FL
2.1 TITLE	☐ Change ☒ Addition
2.2 NAME	V Prentiss, Donna
2.3 STREET ADDRESS	2611 Scott St.
2.4 CITY-ST-ZIP	Hollywood, FL
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☒ Addition
6.2 NAME	D England, Lois
6.3 STREET ADDRESS	532 S. Luna Ct. #4
6.4 CITY-ST-ZIP	Hollywood, FL 33020

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE:

Norma Leaman

SIGNATURE REQUIRED

7/25/97 (954) 921-7992

CR2E037 (4/97)