

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 738034 (8)

1. Corporation Name

HOLLYWOOD JUNIOR WOMAN'S CLUB, INC.



Principal Place of Business

P O BOX 6114
HOLLYWOOD FL 33081-0114

Mailing Address

P O BOX 6114
HOLLYWOOD FL 33081-0114

3. Date Incorporated or Qualified
02/18/1977

3a. Date of Last Report
03/15/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number
59-1622494

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**CARTER, JEANNETTE
401 N RAINBOW DRIVE
HOLLYWOOD FL 33021**

10. Name and Address of New Registered Agent

81 Name

Norma Benson

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

1831 N. 54 Avenue

83

84 City

Hollywood

FL

85 Zip Code
33021

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 Benson

Norma Benson

2-7-96

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

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **S MITCHELL, ELIZABETH**
STREET ADDRESS **1801 N 52 AVE**
CITY - ST - ZIP **HOLLYWOOD FL**

TITLE ☒ DELETE

NAME **PD CARTER, JEANNETTE**
STREET ADDRESS **401 N RAINBOW DRIVE**
CITY - ST - ZIP **HOLLYWOOD FL**

TITLE ☐ DELETE

NAME **TD BENSON, NORMA J.**
STREET ADDRESS **1831 N 54 AVE**
CITY - ST - ZIP **HOLLYWOOD FL**

TITLE ☐ DELETE

NAME **VD HOLLAND, LORRAINE**
STREET ADDRESS **4214 FILLMORE ST**
CITY - ST - ZIP **HOLLYWOOD FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

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

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

VD
Honi Parker
2815 Morning Glory Lane
Davie, FL 33328

200001922712
-08/15/96--01005--027
*****61.25**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 Benson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-7-96

Date

(954) 983-8374

Daytime Phone #

05 8/14/96

CR2E037 (12/95)