

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2002 8:00 am
Secretary of State

03-06-2002 90067 050 ****61.25

DOCUMENT # 738034

1. Entity 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

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

59-1622494

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

MARTENS, SUSIE
2809 MORNING GLORY LANE
DAVIE FL 33328

7. Name and Address of New Registered Agent

Name **Joanne DeLizza**

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

1602 Eastlake Way
Weston, FL 33326

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]

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/6/02

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

TITLE **VPD** ☒ Delete
 NAME **SPASIANO, PATTY**
 STREET ADDRESS **3504 ARTHUR STREET**
 CITY-ST-ZIP **HOLLYWOOD FL 33021**

TITLE **TD** ☒ Delete
 NAME **STRICKMAN, JENNIFER**
 STREET ADDRESS **4951 SW 33RD TERRACE**
 CITY-ST-ZIP **DAVIE FL 33328**

TITLE **PD** ☒ Delete
 NAME **MARTENS, SUZIE**
 STREET ADDRESS **2809 MORNING GLORY LANE**
 CITY-ST-ZIP **DAVIE FL 33328**

TITLE **SD** ☒ Delete
 NAME **THOMPSON, MARYBETH**
 STREET ADDRESS **17408 NW 8TH ST.**
 CITY-ST-ZIP **PEMBROKE PINES FL 33025**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VPD** ☒ Change ☐ Addition
 NAME **Marybeth Thompson**
 STREET ADDRESS **17408 NW 8 ST.**
 CITY-ST-ZIP **Pembroke Pines, FL 33025**

TITLE **3D** ☒ Change ☐ Addition
 NAME **Caren Chase**
 STREET ADDRESS **5000 W. Park Rd.**
 CITY-ST-ZIP **HOLLYWOOD, FL 33021**

TITLE **TD** ☒ Change ☐ Addition
 NAME **Denise Paparella**
 STREET ADDRESS **5501 Roosevelt St**
 CITY-ST-ZIP **HOLLYWOOD, FL 33021**

TITLE **PD** ☒ Change ☐ Addition
 NAME **Joanne DeLizza**
 STREET ADDRESS **1602 Eastlake Way**
 CITY-ST-ZIP **Weston, FL 33326**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

Denise Paparella Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/18/02 954-985-1393

Date

Daytime Phone #

CR2E037 (9/01)