

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 # 740761

(2)

1. Corporation Name

THE ROSETTE WOMEN'S CLUB, INC.



Principal Place of Business

Mailing Address

4094 COLUMBIA ST  
ORLANDO FL 32811

4094 COLUMBIA ST  
ORLANDO FL 32811

3. Date Incorporated or Qualified  
11/15/1977

3a. Date of Last Report  
02/09/1995

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

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STEWART, MRS LOUISE  
4094 COLUMBIA ST  
ORLANDO FL 32811

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE SD ☒ DELETE  
NAME VENCINA, CANNADY B  
STREET ADDRESS 812 RANDALL ST.  
CITY - ST - ZIP ORLANDO FL

11 TITLE SD ☐ Change ☒ Addition  
12 NAME King, Susan  
13 STREET ADDRESS 6218 W. Ridgewood Ave  
14 CITY - ST - ZIP Orlando, FL

TITLE V ☐ DELETE  
NAME TEJADA, WANDA  
STREET ADDRESS 2921 W CONCORD ST.  
CITY - ST - ZIP ORLANDO FL

21 TITLE ☐ Change ☐ Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP

TITLE PD ☐ DELETE  
NAME STEWART, LOUISE  
STREET ADDRESS 4094 COLUMBIA ST.  
CITY - ST - ZIP ORLANDO FL

31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP

TITLE TD ☐ DELETE  
NAME MIDDEBROOK, GRACE  
STREET ADDRESS 232 LIONEL AVE.  
CITY - ST - ZIP ORLANDO FL

41 TITLE ☐ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

TITLE D ☐ DELETE  
NAME STANLY, BENNIE  
STREET ADDRESS 4099 MINOSA ST  
CITY - ST - ZIP ORLANDO, FL 00000

51 TITLE ☐ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

TITLE S ☐ DELETE  
NAME DALLAS, GENEVA  
STREET ADDRESS 216 ST. JOHNS CIR. #200  
CITY - ST - ZIP FERN PARK FL

61 TITLE ☐ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP

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, changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)