FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUI 1. Corporatio	MENT # 74076	1 (2)	-		
THE ROSETTE WOMEN'S CLUB, INC.					
					HANK EDÊN ENEN ENENÊ ANOM IREK
Principal Plac	e of Business	Mailing Address		L 1984H 1981) 379H BOARA NORIO GUITA IRAK DIAH D	FBII DAUM BADAN GNAN GMAN ISBOR
4094 COLUMBIA ST 4094 COLUMBIA ST				3. Date Incorporated or Qualified	
ORLANDO FL 3	12811	ORLANDO FL 32811		11/15/1977	
				4. FEI Number	Applied For
2. Principal P	lace of Business	2a. Mailing Address		59-2132689	Not Applicable
26			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Suite, Apt. #, etc.			6. Election Campaign Financing	\$5.00 May Be	
			Trust Fund Contribution	Added to Fees	
23	ty a state			7. Is this nonprofit corporation a homeown	ers association?
Zip	Country	Zip	Country	This corporation owes or has paid the circumstance of the cir	
24	25	29	30	Personal Property Tax due June 30.	☐ Yes 🎵 No
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Registered	1 Agent
CTELLAD	IT MODEL OLHOC		Name	t	
STEWART, MRS LOUISE 4094 COLUMBIA ST			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32811			83		
0,,54,0	0 1 2 02011		84 City		les l 3's Os de
			1.1.7	FI	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 register 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.					
agent. I a	m familiar with, and accept the obli	gations of, Section 617.0503, F	lorida Statutes.	attorns board or directors. Thereby accept the ap	pomiment as registered
SIGNATURE	Signature, lyped or printed name of registered as	nent and title it applicable (NO	TE: Registered Agent signature requ	uired when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	SD	☐ DELETE	1.1 TITLE		Change Addition
NAME	KING, SUSAN		1.2 NAME		
STREET ADDRESS	6218 W. RIDGEWOOD AVEN	UE	1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL	Deter	1.4 CITY-ST-ZIP		
TITLE NAME	V TEJADA MANDA	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS	TEJADA, WANDA 2921 W CONCORD ST.		2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		2.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	STEWART, LOUISE		3.2 NAME		
STREET ADDRESS	4094 COLUMBIA ST.		3.3 STREET ADDRESS		
-CITY-ST-ZIP	ORLANDO FL	200,000	3.4. CITY-ST-ZIP		
TITLE	MIDDERDOOK CDACE	☐ DELETE	4.1 TITLE		Change Addition
NAME STREET ADDRESS	MIDDEBROOK, GRACE 232 LIONEL AVE.		4. 2 NAME		
CITY-ST-ZIP	ORLANDO FL		4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE	D	DELETE	5.1 TITLE		Change Addition
NAME	STANLY, BENNIE		5.2 NAME		
STREET ADDRESS	4099 MINOSA ST		5.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 00000		5.4 CITY-ST-ZIP		
TITLE	\$	☐ DELETE	6 1 TITLE		☐ Change ☐ Addition
NAME	DALLAS, GENEVA		6.2 NAME		
STREET ADORESS	218 ST JOHNS CIR #200		6 2 CTOCCY ADDRESS		1

14. 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 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 chapted, or on an attachment with an address.

Grenzia Dallas

2-2-98 930-1196

**FILED** 

Feb 18 1998 8:00am

Secretary of State