

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90085 031 ****61.25

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DOCUMENT # 744140

1. Corporation Name

WOMEN'S EXECUTIVE CLUB, INC.

Principal Place of Business

2901 NE 43 STREET
FT LAUDERDALE FL 33308
US

Mailing Address

2901 NE 43 STREET
FT LAUDERDALE FL 33308
US



2. Principal Place of Business

21 **Bailey's Printing Plus**
Suite, Apt. #, etc.

22 **2508 W. Oakland Park Blvd.**
City & State

23 **Fort Lauderdale, FL**

24 **33311** **USA**

2a. Mailing Address

26 **Bailey's Printing Plus**
Suite, Apt. #, etc.

27 **2508 W. Oakland Park Blvd.**
City & State

28 **Fort Lauderdale, FL**

29 **33311** **USA**

3. Date Incorporated or Qualified

09/01/1978

4. FEI Number

59-1980608

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

9. Name and Address of Current Registered Agent

WALSH, DIANE
3111 UNIVERSITY DR
STE. 1050
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name **Durham Records Services**

82 Street Address (P.O. Box Number is Not Acceptable)
751 NW 33 Street Suite 160

83

84 City **Pompano Beach**

FL

85 Zip Code
33064

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

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

Marsha Durham
(NOTE: Registered Agent signature required when installing)

Treasurer

1/4/99
DATE

12. OFFICERS AND DIRECTORS

TITLE **VPD** ☐ DELETE
NAME **TRODICK, GERI**
STREET ADDRESS **3600 NORTH STATE RD #7**
CITY-ST-ZIP **FT. LAUDERDALE FL 33319**

TITLE **PF** ☐ DELETE
NAME **BLOCK, NANCY**
STREET ADDRESS **1044 N.E. 15TH AVE**
CITY-ST-ZIP **FT. LAUDERDALE FL 33304**

TITLE **DPP** ☒ DELETE
NAME **MCCARTHY, PATRICIA**
STREET ADDRESS **1825 GRIFFIN RD**
CITY-ST-ZIP **DANIA FL 33964**

TITLE **VPD** ☒ DELETE
NAME **WALSH, DAINE**
STREET ADDRESS **3111 UNIVERSITY DR., STE. 1050**
CITY-ST-ZIP **CORAL SPRINGS FL 33065**

TITLE **DPE** ☐ DELETE
NAME **SHEFFIELD, LEE**
STREET ADDRESS **ONE UNIVERSITY DR**
CITY-ST-ZIP **PLANTATION FL**

TITLE **VPD** ☐ DELETE
NAME **BAILEY-GEORGE, CAMIE**
STREET ADDRESS **2508 W OAKLAND PARK BLVD**
CITY-ST-ZIP **FT LAUDERDALE FL 33311**

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 **Ellen Kramer**
3.3 STREET ADDRESS **18839 Caspian Cir.**
3.4 CITY-ST-ZIP **Boca Raton, FL 33496**

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME **T**
4.3 STREET ADDRESS **Marsha Durham**
4.4 CITY-ST-ZIP **751 NW 33rd St. Suite 160**
Pompano Beach, FL 33064

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

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Marsha Durham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/99 954-474-1712
Date Daytime Phone #

CR2E037 (1/98)