2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #744140

t. Entity Name
WOMEN'S EXECUTIVE CLUB, INC.

Principal Place of Business

2318 SEA ISLAND DRIVE FT LAUDERDALE, FL 33301 U Mailing Address

2318 SEA ISLAND DRIVE FT LAUDERDALE, FL 33301

US

FILED May 03, 2005 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

04292005 No Chg-NP

CR2E037 (10/03)

4. FEI Number 59-1980608 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

POWELL, JACQUELINE 2318 SEA ISLAND DRIVE FT LAUDERDALE, FL 33301

DO NOT WRITE IN THIS SPACE

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	e named entity submits this statement for the pations of registered agent.	ourpose of changing its registere	d office or (registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE			i Agent signatur	Agent signature required when reinstating) DATE	
	Filing Fee is \$61,25 Due by May 1, 2005	Election Campaign Finar Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10. ÖFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NICKEL, LEIGH 276 S UNIVERSITY DRIVE PLANTATION, FL 33324				.000000361337 .05/05/05-80071-020 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MOUSTAKIS, DEE 6001 NE 18 TERR. FORT LAUDERDALE, FL 33308		-		· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD POWELL, JACQUELINE 2318 SEA ISLAND DRIVE FORT LAUDERDALE, FL 33301			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP RUSHIN, EMILY 2636 BARBARA DR. FORT LAUDERDALE, FL 33316			IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KARLIN, RONNIE 6135 NW 167 ST., STE E-15 MIAMI, FL 33015				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP GODFREY, VIVIAN 1481 SE 17 ST. FORT LAUDERDALE, FL 33316				

12. I hereby certify that the information supplied with this filling 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 term of the corporation or the receiver or trustee empowered to execute this period as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on amattachment with any address, with all other like suppowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR