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FILED
May 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 748925 (5)

1. Corporation Name
SOROPTIMIST INTERNATIONAL OF CORAL GABLES, INCORPORATED



Principal Place of Business 718 UNIVERSITY DRIVE CORAL GABLES FL 33134	Mailing Address 718 UNIVERSITY DRIVE CORAL GABLES FL 33134
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3. Date Incorporated or Qualified 09/14/1979	
4. FEI Number 59-6132499	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	30

9. Name and Address of Current Registered Agent

**ROGERS, SUZANNE L.
718 UNIVERSITY DRIVE
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

FL

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> DELETE
NAME	NORD, PATRICIA
STREET ADDRESS	439 MINORCA AVE
CITY-ST-ZIP	CORAL GABLES FL
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	BENDINGER, RUTH
STREET ADDRESS	9700 SW 157 TERR
CITY-ST-ZIP	MIAMI FL
TITLE	T <input type="checkbox"/> DELETE
NAME	GALEY, JANE
STREET ADDRESS	6231 SW 118 PLACE, UNIT E
CITY-ST-ZIP	MIAMI FL
TITLE	S <input type="checkbox"/> DELETE
NAME	MILLAR, SHIRLEY
STREET ADDRESS	4178 EL PRADO BLVD
CITY-ST-ZIP	COCONUT GROVE FL
TITLE	P <input checked="" type="checkbox"/> DELETE
NAME	OLEXA, HILDA B.
STREET ADDRESS	10084 SW 118 CT
CITY-ST-ZIP	MIAMI FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	D NAURIE RASEY
1.3 STREET ADDRESS	4100 Woodridge Road
1.4 CITY-ST-ZIP	COCONUT GROVE, FL 33133
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	P Root, Beverly F
5.3 STREET ADDRESS	11611 SW 104 Court
5.4 CITY-ST-ZIP	Miami, FL 33176-4003
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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.

SIGNATURE: *Jane Galey* *April 7, 1998*

CFR2E037 (10/97)