## **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

DOCUMENT #

749588

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SARASOTA-MANATEE SECTION NATIONAL COUNCIL OF JEW ISH WOMEN, INC.

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Suite, Apt. #, etc.    Suite, Apt. #, etc.	2. Principal P	<b>⊢</b>	iling Address			5. Certificate of Status Desired \$8.75 Additiona	lk		
City & State		#, etc.	Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be		
28	22						Trust Fund Contribution Added to Fees		
26 29 30 10. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name 10. Name and Address of New Registered Agent 10. Name	City & State	е	<b>⊢</b>						
WEISNER, IRA S 1800 2ND ST., SUITE 870 SARASOTA FL 34236  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 and familiar with, and accept the obligations of, Section 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 and their applicable of 17.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent ag	Zip	Country	Zip	Co	untry	,	8. This corporation owes or has paid the current year Intangible		
WEISNER, IRA S 1800 2ND ST., SUITE 870 SARASOTA FL 34238  82 Street Address (P.O. Box Number is Not Acceptable)  83 City FL 85 Zip Code  84 City FL 85 Zip Code  85 City FL 86 Zip Code  86 City FL 86 Zip Code  87 City FL 86 Zip Code  88 City FL 86 Zip Code  88 City FL 86 Zip Code  89 City FL 86 Zip Code  89 City FL 80 Zip Code  81 Zip Code  81 Zip Code  81 Zip Code  81 Zip Code  82 Site Address (P.O. Box Number is Not Acceptable)  80 Zip Code  81 Zip Code  81 Zip Code  82 Zip Code  83 City FL 80 Zip Code  84 City FL 80 Zip Code  85 Zip Code  86 Zip Code  86 Zip Code  86 Zip Code  86 Zip Code  87 Zip Code  87 Zip Code  88 City FL 80 Zip Code  88 City FL 80 Zip Code  89 Zip Code  80 Z	24			30					
WEISNER, IRA S 1800 2NO ST., SUITE 870 SARASOTA FL 34238  82 Street Address (P.O. Box Number is Not Acceptable)  83		9. Name and Address of Curre	nt Registered Agent		1_				
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 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, 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 agent and the provision of the purpose of changing its registered agent agen					81	Name	9		
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 obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  P	Weisner, Ira s				82	Street	at Address (P.O. Box Number is Not Acceptable)		
SARASOTA FL 34236  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 * applicable*  (NOTE Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PAME  SCOTT, LEANORE E  6746 PASEO CASTILLE  SARASOTA FL  34238  DELETE  13. STREET ADDRESS  CITY-ST-ZIP  SARASOTA FL  34243  14. City  TITLE  D  LORING  12. NAME  13. STREET ADDRESS  CITY-ST-ZIP  SARASOTA FL  34243  14. City  TITLE  T  Change  Addition  Addition  TITLE  T  Change  Addition  TITLE  VP  Addition  TITLE  T  Change  Addition  TITLE  VP  Addition  TITLE  T  Change  Addition  TITLE  VP  Addition  TITLE  VP  Addition  TITLE  T  Change  Addition  TITLE  VP  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  TITLE  VP  Addition  TITLE  VP  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  T  Change  Addition  THE STREET ADDRESS  TITLE  VP  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  T  Change  Addition  TITLE  VP  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  T  Change  Addition  THE STREET ADDRESS  TITLE  VP  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  T  Change  Addition  T  T  Change  Addition  T  T  Change  Addition  T  T  T  T  T  T  T  T  T  T  T  T  T	1800 2ND ST., SUITE 870								
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 agent, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  Signature, typed or printed name of registered agent and title # applicable (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITILE  P  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITILE  P  Change  Addition  Hannah Honeyman  STREET ADDRESS  CITY-ST-ZIP  SARASOTA FL  34.238  DELETE  21 TITLE  D  Change  Addition  SURREY, ROZ  TOOD FAIRWAY BEND CIR.  CITY-ST-ZIP  SARASOTA FL  34.243  TITLE  VP  Change  Addition  Addition  DELETE  11 TITLE  T  Change  Addition  Change  Addition  Addition  AMME  FISHMAN, LAURICE  STREET ADDRESS  5624 COUNTRY CLUB WAY  33 STREET ADDRESS  5624 COUNTRY CLUB WAY					83				
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 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, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  P  DELETE  1.1 TITLE  VP  DELETE  1.2 NAME  1.3 STREET ADDRESS  CITY-ST-ZIP  SARASOTA FL  3.4 2.3 8  DELETE  1.2 TITLE  NAME  SURREY, ROZ  STREET ADDRESS  TOGO FARWAY BEND CIR.  SARASOTA FL  3.4 2.4 3  DELETE  2.2 NAME  2.2 NAME  2.2 STREET ADDRESS  TOGO FARWAY BEND CIR.  SARASOTA FL  3.4 2.4 3  DELETE  3.1 TITLE  VP  DELETE  3.1 TITLE  3.1					84	City	EI 85 Zip Code		
Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE	office or r	registered agent, or both, in the Stat	e of Florida. Such change w	as authorize	ed be	the core	ed corporation submits this statement for the purpose of changing its registe	ed	
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  P SCOTT, LEANORE E STREET ADDRESS  6746 PASEO CASTILLE STREET ADDRESS  CITY-ST-ZIP  TITLE  D SURREY, ROZ STREET ADDRESS  TOPO FAIRWAY BEND CIR. STREET ADDRESS  CITY-ST-ZIP  SARASOTA FL  34 24 3  DELETE  22 NAME 22 NAME 23 STREET ADDRESS  CITY-ST-ZIP  SARASOTA FL  34 24 3  DELETE  23 STREET ADDRESS  TITLE  VP DELETE  31 TITLE  VP DELETE  31 TITLE  VP DELETE  32 NAME STREET ADDRESS  5624 COUNTRY CLUB WAY  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  VP Hannah Honeyman  STREET ADDRESS  14 CITY-ST-ZIP  SARASOTA FL  34 24 3  Change Addition	SIGNATURE .								
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STREET ADDRESS 5624 COUNTRY CLUB WAY 33 STREET ADDRESS			_ PACE				Change Call Note		
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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)(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.

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

4.3 STREET ADDRESS

**5.3 STREET ADDRESS** 

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

DELETE

DELETE

DELETE

SIGNATURE:

BERMAN, MIMI

SARASOTA FL

DAVIS, GLORIA

3801 FISHING TRAIL

1427 SEAFARER DRIVE

3927 CENTER GRATE DRIVE

GORDON, SHIRLEY

SARASOTA FL

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

CITY-ST-ZIP

34235

34229

34233

Leanore E. Scott, Presgent

<u>(941) 92</u>3 965¢

Change

Change

Change

Addition

Addition

Addition

**FILED** 

Apr 02 1998 8:00am

Secretary of State