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May 20 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morgan Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **755878** (6)
1. Corporation Name
IDEAL WOMAN'S CLUB OF WINTER PARK, FLORIDA, INC.



Principal Place of Business IDEAL NORMAN'S CLUB 141 S PENNSYLVANIA AVE WINTER PARK FL 32789 US	Mailing Address IDEAL WOMAN'S CLUB 141 S PENNSYLVANIA AVE WINTER PARK FL 32789 US
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3. Date Incorporated or Qualified 01/13/1981
4. FEI Number 59-1714341
Applied For ☐ Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent INGRAM, ERNESTINE 878 CALLAHAN ST. 120 S. PENNSYLVANIA AVE. WINTER PARK FL 32789	
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10. Name and Address of New Registered Agent	
81 Name Ernestine Ingram	
82 Street Address (P.O. Box Number is Not Acceptable) 678 Callahan St	
83 City 141 S. Pennsylvania Ave	
84 State FL	85 Zip Code 32789

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	☐ DELETE
NAME	D INGRAM, ERNESTINE
STREET ADDRESS	678 CALLAHAN ST
CITY-ST-ZIP	WINTER PARK FL
TITLE	☐ DELETE
NAME	VD DIXON, BEVERLY
STREET ADDRESS	431 PENNSYLVANIA AVE
CITY-ST-ZIP	WINTER PARK FL
TITLE	☐ DELETE
NAME	S EARLENE, BLUE
STREET ADDRESS	777 W. LYMAN AVE.
CITY-ST-ZIP	WINTER PARK FL
TITLE	☐ DELETE
NAME	T CERTAIN, ROUVENIA
STREET ADDRESS	4038 LAUREL BRANCH LN
CITY-ST-ZIP	ORLANDO FL
TITLE	☐ DELETE
NAME	T BLUE, EARLENE
STREET ADDRESS	777 W. LYMAN AVENUE
CITY-ST-ZIP	WINTER PARK FL
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	D Ingram Ernestine
1.3 STREET ADDRESS	678 Callahan St
1.4 CITY-ST-ZIP	Winter Park FLA
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	VD Dixon Beverly
2.3 STREET ADDRESS	431 Pennsylvania Ave
2.4 CITY-ST-ZIP	Winter Park FLA
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	B Blue Earlene
3.3 STREET ADDRESS	777 W. Lyman Ave
3.4 CITY-ST-ZIP	Winter Park, FLA
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	T Certain Rouvenia
4.3 STREET ADDRESS	4038 Laurel Branch Ln
4.4 CITY-ST-ZIP	Orlando, FLA
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	T Blue Earlene
5.3 STREET ADDRESS	777 W. Lyman Ave
5.4 CITY-ST-ZIP	Winter Park, FLA
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.

SIGNATURE: *Ernestine Ingram President 5/10/98*

CR2E037 (10/97)