

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90365 015 ****61.25

DOCUMENT # 758789

1. Entity Name

THE TAMPA BAY AREA WOMAN'S CLUB, INC.



Principal Place of Business

Mailing Address

4512 NETHERWOOD DR
TAMPA FL 33624
US

4512 NETHERWOOD DR
TAMPA FL 33624
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/05)

City & State

City & State

4. FEI Number

59-2166794

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FORSYTH, ALICE
4512 NETHERWOOD DR
TAMPA FL 33624

Name

Audrey W. Jones

Street Address (P.O. Box Number is Not Acceptable)

2253 NORWEGIAN DR #55

Clearwater

City

FL

Zip Code

33763

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Audrey W. Jones

3-1-06

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME FORSYTH, ALICE
STREET ADDRESS 4512 NETHERWOOD DR
CITY-ST-ZIP TAMPA FL 33624

TITLE ☒ Change ☐ Addition
NAME ROBIN OTTO
STREET ADDRESS 10634 ASHFORD OAKS DR.
CITY-ST-ZIP TAMPA, FL 33625-3759

TITLE PD ☐ Delete
NAME HOWARD, MARY
STREET ADDRESS 13572 AVISTA DR.
CITY-ST-ZIP TAMPA FL 33624

TITLE ☒ Change ☐ Addition
NAME VICE PRESIDENT
STREET ADDRESS BARBARA VAUGHT
CITY-ST-ZIP 3606 BEACH DR.
TAMPA, FL 33629

TITLE VD ☐ Delete
NAME HAMILTON, ANN
STREET ADDRESS 1909 CURRY RD
CITY-ST-ZIP LUTZ FL 33549

TITLE ☒ Change ☐ Addition
NAME SECRETARY
STREET ADDRESS LILLIAN RAINCY
CITY-ST-ZIP 5637 TERRAIN de GULF DR.
LUTZ, FL 33558

TITLE TD ☐ Delete
NAME GLYNN, RUTH
STREET ADDRESS 4832 TAMPA DOWNS BLVD
CITY-ST-ZIP LUTZ FL 33559

TITLE ☒ Change ☐ Addition
NAME TREASURER
STREET ADDRESS Anne Watkins
CITY-ST-ZIP 2469 FRANCISAN DR # 9
Clearwater, FL 33763

TITLE T ☐ Delete
NAME GENN, MARGARET
STREET ADDRESS 12401 N 22ND ST H102
CITY-ST-ZIP TAMPA FL 33612

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Audrey W. Jones

Audrey W. Jones 3-1-06 (127) 726-5856