

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

1/18/200

FILED
Feb 16, 2005 8:00 am
Secretary of State

01-18-2005 90062 016 ****61.25

DOCUMENT # 759677			
1. Entity Name THE DAVIE WOMAN'S CLUB			
Principal Place of Business 6551 ORANGE DR DAVIE, FL 33314 US		Mailing Address 4340 SW 67TH TERR DAVIE, FL 33314 US	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address P.O. Box 291053 Suite, Apt. #, etc.	
City & State		City & State DAVIE FL	
Zip	Country	Zip	Country
33329-1053		33329-1053	
4. FEI Number 59-6170679		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ZIEGLER, MARTHA 4340 SW 67TH TERR DAVIE, FL-33314		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 <u>MARTHA ZIEGLER</u> Signature, typed or printed name of registered agent and title if applicable.		DATE <u>2/11/05</u> (NOTE: Registered Agent signature required when renewing)	
Filing Fee is \$61.25 Due by May 1, 2005		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			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD QUINN, GILDA 3401 CARLTON LANE DAVIE, FL 33330 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT JOYCE SALVINO 4765 SW 61 AVENUE DAVIE FL 33314 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VO SALVINO, JOYCE 4765 SW 61ST AVE DAVIE, FL 33314 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT E.L. HENNIG 4979 S.W. 91 AVENUE COOPER CITY FL 33328 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ZIEGLER, MARTHA 4340 SW 67TH TERR DAVIE, FL 33314 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER MARTHA ZIEGLER 4340 SW 67 TERRACE DAVIE FL 33314 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CS CRITES, MICHELE 1181 SW 109 LANE DAVIE, FL 33324 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MAVIS ROWLAND 5850 LINCOLN STREET HOLLYWOOD FL 33021 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(k), 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: <u>MARTHA ZIEGLER</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE <u>Jan. 13, 2005</u> Daytime Phone: 754-791-8693	