2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #762389

1. Entity Name PUNTA GORDA WOMAN'S CLUB, INC.



FILED Jan 25, 2007 8:00 am Secretary of State

01-25-2007 90054 039 ****61.25

Principal Place 118 SULIVA PUNIAGOR	NSIFEET		Mailing Address POBOX51178 PUNTAGOPDA I		ധ		4000				
2. Principal P	lace of Busin	ess - No P.O. Box #	3. Mailing Address	,						793	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			01	222007	Chg-NP	CR2	2E037 (12/06)	
City & State			City & State				4. FEI Number Applied For Not Applied For Not Applied For				
Zip		Country	Zip	Coi	untry	5.	Certificate o	f Status Desired		\$8.75 Add	
	6. Name	and Address of Current I	Registered Agent	L.		7.	Name and A	Address of New	Register	red Agent	
MCCOMBS 3907 MAD PUNTA GO	RID CT	33950-8026			Street Add	dress (P.O.	Box Number	Holland is Not Acceptab bor Blvc	je) 1 •		
							Gorda				o−6509
		submits this statement for	the purpose of chang	ging its register	ed office or r	registered a	gent, or both	, in the State of F	lorida. 1	am familiar with,	and accept
SIGNATURE .		ered agent. i: bara R. Holl or printed name of registered agent a			Barbar ed Agent signature			(Ireasur		1-22-0	7
	Filing Fe	e is \$61.25	9. Electi	on Campaign f	inancing	\$5	.00 May Be	,	Make cl	heck payable t	0
		lay 1, 2007	Trust	Fund Contribut	tion. C		ed to Fees	Flo	orida De	epartment of S	tate
10.			l	Fund Contribut		Ädd	ed to Fees	Flo		partment of S	
10.		lay 1, 2007	l	11.		Ädd	ed to Fees	Flo			
	Due by N	OFFICERS AND DIF	ECTORS	11.	E F	Add ADDI	ed to Fees	Flo		D DIRECTORS IN	1 10
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TITLE NAME	SD MUNSON 2715 LAK PORT CH	OFFICERS AND DIF	ECTORS	B TITL NAM	E F KE J EET ADDRESS 1	Add ADDI PD Jannet 15550	ed to Fees TIONS/CHAI t S. Burnt	NGES TO OFFICE Hawley	ers and	D DIRECTORS IN Change #174 3955	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	SD MUNSON 2715 LAK PORT CH	OFFICERS AND DIF PAT ESHORE CIRCLE ARLOTTE, FL 33952	ECTORS	B TITL NAM STR CITY	E F ME J EET ADDRESS 1 7-ST-ZIP F E V	Add ADDI PD Jannet 15550	ed to Fees TIONS/CHAI t S. Burnt	NGES TO OFFIC Hawley Store	ers and	D DIRECTORS IN Change	1 10
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^{12.} I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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.

Caribara C. Holland, Jeanurer