FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 FEB 28 AM 8:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # 762487 (7)

1. Corporation Name

HERNANDO BEACH WOMEN'S CLUB, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
C/O KATHLEEN LONERGAN 4120 CAMELIA DRIVE HERNANDO BEACH FL 34607	C/O KATHLEEN LONERGAN 4120 CAMELIA DRIVE HERNANDO BEACH FL 34607

3. Date Incorporated or Qualified: 03/18/1982
3a. Date of Last Report: 04/26/1994
4. FEI Number: 59-2177848 ☐ Applied For ☐ Not Applicable
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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
LONERGAN, KATHLEEN F 4120 CAMELIA DRIVE HERNANDO BEACH FL 34607	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PP	1.1 TITLE	P ☒ Change ☐ Addition
NAME	SIVERTSEN, IRENE	1.2 NAME	JURGENS, DOROTHY
STREET ADDRESS	4151 CAMELIA DR	1.3 STREET ADDRESS	8083 SHALON DRIVE
CITY-ST-ZIP	HERNANDO BCH FL	1.4 CITY-ST-ZIP	SPRING HILL, FL
TITLE	D	2.1 TITLE	D ☒ Change ☐ Addition
NAME	BREEDEN, ELIZABETH	2.2 NAME	RUSSELL, HELEN
STREET ADDRESS	3161 FLAMINGO BLVD	2.3 STREET ADDRESS	3359 GARDENIA DRIVE
CITY-ST-ZIP	HERNANDO BEACH FL	2.4 CITY-ST-ZIP	HERNANDO BEACH, FL 34607
TITLE	P	3.1 TITLE	D ☒ Change ☐ Addition
NAME	THOMPSON, ADA	3.2 NAME	KRABEL, JANE
STREET ADDRESS	4338 FLEXER DRIVE	3.3 STREET ADDRESS	4124 DAISY DRIVE
CITY-ST-ZIP	HERNANDO BEACH FL	3.4 CITY-ST-ZIP	HERNANDO BEACH, FL 34607
TITLE	D	4.1 TITLE	D ☒ Change ☐ Addition
NAME	ELIZABETH TRAVERS	4.2 NAME	CARPENTER, MARIE
STREET ADDRESS	4472 JACOMA DRIVE	4.3 STREET ADDRESS	4346 FLEXER DRIVE
CITY-ST-ZIP	HERNANDO BEACH FL	4.4 CITY-ST-ZIP	HERNANDO BEACH, FL 34607
TITLE	D	5.1 TITLE	VP ☒ Change ☐ Addition
NAME	KOVOLKA, ELEANOR	5.2 NAME	DAMATO, THERESA
STREET ADDRESS	4147 DES PRES CT.	5.3 STREET ADDRESS	4109 GULF COAST DRIVE
CITY-ST-ZIP	HERNANDO BEACH FL	5.4 CITY-ST-ZIP	HERNANDO BEACH, FL 34607
TITLE	T	6.1 TITLE	☐ Change ☐ Addition
NAME	LONERGAN, KATHLEEN F	6.2 NAME	
STREET ADDRESS	4120 CAMELIA DRIVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	HERNANDO BEACH FL	6.4 CITY-ST-ZIP	OUT

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Kathleen F. Lonergan - TREASURER 1-13-95 -904- 683-5307
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

KATHLEEN F. LONERGAN

0068803

Hernando Beach Women's Club, Inc.
4120 Camelia Drive
Hernando Beach, FL 34607

February 23, 1995

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Att.: Cynthia Hendrixson,
Annual Report Section

Re: Hernando Beach Women's Club
Document #762487

Dear Ms. Hendrixson:

On January 13th, 1995, I forwarded the 1995 Corporation Annual Report, together with a check in the sum of $61.25, on behalf of the Hernando Beach Women's Club.

On February 22nd, 1995, I received your letter, dated February 16th, 1995, returning the document and check, and indicating that the document was not filed.

YES, I did indicate in Block 7 that the Corporation has 501(c)(3) tax exempt status. That's because the Corporation is not-for-profit and does have 501(c)(3) tax exempt status. Your letter indicates that if the Corporation has tax exempt status the fee for filing is $61.25. YES, I did send a check for $61.25 as the filing fee. NO, I did not want a certificate of status so I did not send an additional $8.75.

After careful review and as far as I can see, there are no corrections to be made to this document.

I am again sending you the 1995 Corporation Annual Report, together with a check in the sum of $61.25. Is it possible for the document to be filed?

Very truly yours,

Kathleen F. Lonergan

Kathleen F. Lonergan
Treasurer
(904) 597-1130

Encs.