1/27/98 FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State**
DIVISION OF CORPORATIONS

DOCUMENT # 765653

(1)

THE PERRY WOMAN'S CLUB, INC.

FILED Apr 28 1998 8:00am Secretary of State

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Principal Place	of Business	Mailing Address						
SO2 N. JEFFERSON ST. P.O. BOX 711 PERRY FL 32347		SO2 N. JEFFERSON ST. P.O. BOX 711 PERRY FL 32347			3. Date incorporated or Qualified	1		
					11/03/1982			
	•				4. FEI Number	L	Applied For	
					59-2346187		Not Applicable	
2. Principal Place of Business		2a. Malling Address		5. Certificate of Status Desired	A	.75 Additional se Required		
Suite, Apt.	# etc.	Suite, Apt. #, etc.			8. Election Campaign Financing	······	00 May Be	
22		27	 		Trust Fund Contribution		ded to Fees	
City & State	9	City & State	City & State		7. Is this nonprofit corporation a l	7. Is this nonprofit corporation a homeowners association?		
23		28	0					
Žip			Cou					
24	25	29	30		Personal Property Tax due Jun 10. Name and Address of New R		□ No	
	9. Name and Address of Curr	rent Hegistered Agent		81 Name	10. Name and Address of New H	agistered Agent		
14/41 N/E0					Ratliff, Eunice			
	I, ALMA R.		82 Street Addre		Address (P.O. Box Number is Not Accepted 313 Glenridge Road	able)		
708 E. MARGURITE STREET PERRY FL 32347			ł	63	313 Olempiage Mode			
FERRI	L 32347		į					
				64 City	Perry	FL 85	710-Cpde 32347	
11. Pursuant	to the provisions of Sections 617.0	0502 and 617.1508, Florida Stat	utes, the ab	ove-named	corporation submits this statement for the	purpose of chang	ing its registered	
office or re	egistered agent, or both, in the Sta or temiliar with, and accept the ob-	ate of Florida. Such change was digations of Section 617 0503. I	s authorized Florida Stati	i by the corp utes.	corporation submits this statement for the boration's board of directors. I hereby account of the statement of the boration's board of directors.	ept the appointme	int as registered	
SIGNATURE	Eunice m	KatloAR	Eunic	e M. Ra	tliff, President	4/20/98		
SIGNATURE .	Signature, typed or printed name of registered			Agent signature	required when reinstating)	DATE		
12.		AND DIRECTORS	13.	.: <u></u>	ADDITIONS/CHANGES TO OFF PD	ICERS AND DIREC		
TITLE	PD BARDADA	X) DELETE	1.1 107			E CI	ando (***) vocazion	
NAME	BURNS, BARBARA		1.2 NA		Ratliff, Eunice 313 Glenridge Rd.			
STREET ADDRESS	582 E. ASH ST PERRY FL 32347			REET ADDRESS	Perry, F1., 32347			
CITY-ST-ZIP	VPD	DELETE	1.4 CI 2.1 Til	TY-ST-ZIP	VPD	▼ Ch	ange Addition	
NAME	DORMAN, SHARRON	AD service	2.2 NA		Sanders, Brenda	•	• –	
STREET ADDRESS	RT 5, BOX 420			REET ADDRESS	Rt. 1, Box 736			
CITY-ST-ZIP	PERRY FL 32347			TY-ST-ZIP	Perry, F1., 32347			
TITLE	VPD	□ DELETE	3.1 TIT		VPD	Ş ₹ Ch	ange Addition	
NAME	RATLIFF, EUNICE		3.2 NA	ME	Byers, June			
STREET ADDRESS	313 GLENRIDGE ROAD		3.3 ST	reet address	315 N. Quincy St.,			
CITY-ST-ZIP	PERRY FL 32347			TY-ST-ZIP	Perry, Fl., 32347			
TITLE	\$	☐ DELETE	4.1 10			☐ Ch	ange Addition	
NAME	FOWLER, MARILYN		4.2 N					
STREET ADDRESS	RT 4, BOX 531			REET ADDRESS				
CITY-ST-ZIP	PERRY FL 32347	₩ DELETE		TY-ST-ZIP		_y Ch	ange Addition	
TITLE	I CLOVO DEDTA	TO DEFEIG	5.1 TII	1	<u>T</u>	r March	E POUIDI	
NAME	FLOYD, BERTA 1220 Parkview		5.2 N		Burns, Barbara			
STREET ADDRESS	PERRY FL 32347			REET ADDRESS	582 E. Ash St., Perrv. Fl., 32347			
CITY-ST-ZIP TITLE	RS	X DELETE	5.4 CI	TY-ST-ZIP	Perry, F1., 32347 CS	[元] Ch	ange Addition	
NAME	CONE, INEZ	the section	62 N		Harris, Karen R.	-21	<u> </u>	
STREET ADDRESS	RT 3, BOX 579			REET ADDRESS	Rt. 4. Box 318-5			

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:

Barbara J. Burns

4/20/98

(850) 584-8106