

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765653

FILED
Apr 30, 2004
Secretary of State

Entity Name: THE PERRY WOMAN'S CLUB, INC.

Current Principal Place of Business:

502 N. JEFFERSON ST.
P.O. BOX 711
PERRY, FL 32347 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 711
PERRY, FL 32348 US

New Mailing Address:

FEI Number: 59-2346187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNS, BARBARA JO
582 E ASH STREET
PERRY, FL 32347 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PPD () Delete
Name: BURNS, BARBARA JO
Address: 582 E ASH STREET
City-St-Zip: PERRY, FL 32347

Title: VPD () Delete
Name: KNOBLOCK, PHYLLIS
Address: 2600 WOODS CREEK ROAD
City-St-Zip: PERRY, FL 32347

Title: VPD () Delete
Name: JOYAL, NANCY
Address: 3475 QUAIL STREET
City-St-Zip: PERRY, FL 32347

Title: S () Delete
Name: MOORE, MADELINE
Address: 210 PINELAND RD
City-St-Zip: PERRY, FL 32348

Title: T () Delete
Name: SPARKMAN, ERNESTINE
Address: 108 ELIZABETH LANE
City-St-Zip: PERRY, FL 32347

Title: PD () Delete
Name: BYERS, JUNE
Address: 315 N QUINCY ST
City-St-Zip: PERRY, FL 32347

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: BURNS, BARBARA JO
Address: 582 E ASH STREET
City-St-Zip: PERRY, FL 32347

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: JOYAL, NANCY
Address: 3475 QUAIL STREET
City-St-Zip: PERRY, FL 32347

Title: S (X) Change () Addition
Name: PARKER, IRIS
Address: 4400 RUDOLPH PARKER LANE
City-St-Zip: PERRY, FL 32347

Title: VPD (X) Change () Addition
Name: RAULERSON, JEANNE
Address: 2675 BAXTER ROAD
City-St-Zip: PERRY, FL 32348

Title: PPD (X) Change () Addition
Name: BYERS, JUNE
Address: 4259 HARRISON BLUE ROAD
City-St-Zip: PERRY, FL 32347

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA JO BURNS

TD

04/30/2004

Electronic Signature of Signing Officer or Director

Date