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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 848158

1. Corporation Name

(2)

SPIRITUAL ENLIVENMENT OF WOMEN FOUNDATION, INC.

-	FILEI	)
Feb 25	1997	8:00am
Secre	etary o	of State

	8   8   8   8   8   8   8   8   8   1   1

Principal Place of Business	Mailing Address					#1#11 #1#11 (##)
2025 NE EURO AVENUE LIGHTHOUSE BONT FE 90064	- <del>2025-14-E. CORD TOV</del> E. LIGHTHOUSE POINT FL 33	<b>9</b> 64- <b>823</b> 3				
US 883 So. Eucalyptus Sebring, Fl. 33879		same		3. Date Incorporated or Qualified 02/03/1981	3a. Date of Last 02/06/1	Report 996
2. Principal Place of Business	2e. Mailing Address 26			4. FEI Number 56-0987089		Applied For Not Applicable
Suite Apt # etc 883 So. Eucalyptus	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional Required
City & State Sebring, F1. 33870	City & State			Election Campaign Financing     Trust Fund Contribution		May Be
Zip Country	Zip 1 and s	Countr	у	8. This corporation has liability for in		
9. Name and Address of Current	1	30		10. Name and Address of New Reg		
		81	Name			· · · · · · · · · · · · · · · · · · ·
TUCKER, HILDA F.	. Eucalyptus	St. 82	Street Add	lress (P.O. Box Number is Not Acceptable	le)	
	ring , Fl. 338		19			
		84	City	44444 · · · · · · · · · · · · · · · · ·	FL 65 Zip	Code
<ol> <li>Pursuant to the provisions of Sections 617.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligat</li> </ol>	if Florida. Such change was a	authorized b	v the corpora	poration submits this statement for the pi tion's board of directors. I hereby accep	urpose of changing t the appointment a	its registered is registered
SIGNATURE Signature Typed or printed name of registered agent	and life if ever cable (NOT)	E Registered Ar	ant tionature race	ered when reinstating)	DATE	
12. OFFICERS AND		13.	leur a Burgara rado	ADDITIONS/CHANGES TO OFFIC		RS IN 12
TITLE PD	PD DELETE	1.1 TITLE			Change	
NAME KISLER, KATHERINE W.	•	1.2 NAME				
STREET ADDRESS 4925-N.E23RD-AVENUE	883 So. Eucal Sebring, Fl.	yptus I3sh	T ADDRESS			
CITY-ST-ZIP LIGHTHOUSE PT: FL	Sebring, Fl.	3 3 8 7 0	ST-ZIP			
TITLE VSD	VPST DELETE	2.1 TITLE			☐ Change	Addition
NAME TUCKER, HILDA F.		2.2 NAME				
	883 So. Eucal					
	Sebring, Fl.	33 <u>8</u> 7,0	ST-ZIP			
D NOTE DOLLARD	√ <b>P</b> □ DELETE	3.1 TITLE			Change	Additio
NAME KISER, JOHN RICHARD STREET ADDRESS 2025 N.E. 2020 AVENUE 8		3.2 NAME				
LIALIBUALIA DE SE	83 So. Eucaly					
TITLE D	ebring, F1. 3	4.1 TITLE	-SI-ZIP		Change	Additio
NAME TAYLOR, DEBORAH K.	D D	4.2 NAMI	:		C Orlange	
STREET ADDRESS 2860 NE 23 AVENUE			T ADDRESS			
CITY-ST-ZIP LIGHTHOUSE FL		4.4 CHTY-				
TITLE	DELETE	5.1 TITLE			☐ Change	Additio
NAME Drawn of True Vin	^ ·	5.2 NAME				
Raymond Faul Kis	C I		T ADDRESS			
150/ Colmar Ave.	7.0	5.4 CITY				
TITLE Sebring, F1. 338	DELETE	6.1 TITLE			☐ Change	Additio
NAME		6.2 NAME				
STREET ADDRESS		6.3 STREE	T ADDRESS			
City-ST-ZIP		6.4 CITY-	ST-ZIP			
14. I do hereby certify that the information supplied	with this filing does not qualif			d in Section 119.07(3)(i). Florida Statutes	I further certify the	at the

14. I do 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:

SNATURE AND TYPED OR PRINTED HAVE OF BROWNS OF FEER OR DIRECTOR

Dayline Phone # 0002110