

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 31 AM 11:03

DOCUMENT # **K43921**

(1)

1. Corporation Name

WOMEN'S CLUB OF COCONUT CREEK, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
**C/O REBECCA TOOLEY
4411 COCONUT CREEK BLVD
COCONUT CR FL 33066**

3. Date Incorporated or Qualified **11/07/1988** 3a. Date of Last Report **03/30/1994**

4. FEI Number **59-1911858** Applied For ☐ Not Applicable ☐

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. **26** Suite, Apt. #, etc.

22 City & State **27** City & State

23 Zip **28** Country

24 Zip **25** Country **29** Zip **30** Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**TOOLEY, REBECCA ANN
4411 COCONUT CR BLVD
COCONUT CREEK FL FL 33066**

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

(Signature of President or Chief Executive Officer, Registered Agent and the filer)

(If Not Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	President ☒ Change ☐ Addition
NAME	CASHDOLLAR, LESLIE	1.2 NAME	Arlene Kaplan
STREET ADDRESS	4431 NW 8TH CT.	1.3 STREET ADDRESS	350 Lake Dr
CITY, ST, ZIP	COCONUT CREEK FL	1.4 CITY, ST, ZIP	Coconut Creek, FL 33066
TITLE	V	2.1 TITLE	VP Pres ☒ Change ☐ Addition
NAME	KAPLAN, ARLENE	2.2 NAME	Cindy DeLance
STREET ADDRESS	350 LAKE DR.	2.3 STREET ADDRESS	4408 NW 4th St
CITY, ST, ZIP	COCONUT CREEK FL	2.4 CITY, ST, ZIP	Coconut Creek FL 33066
TITLE	S	3.1 TITLE	☒ Change ☐ Addition
NAME	GILBERT, SUE	3.2 NAME	Tooley, Rebecca
STREET ADDRESS	4180 NW 9TH CT	3.3 STREET ADDRESS	4411 Coconut Creek Blvd
CITY, ST, ZIP	COCONUT CR FL	3.4 CITY, ST, ZIP	Coconut Creek, FL 33066
TITLE	DT	4.1 TITLE	☐ Change ☐ Addition
NAME	BRANDT, RUTH	4.2 NAME	Same
STREET ADDRESS	3950 NW 4 CT	4.3 STREET ADDRESS	
CITY, ST, ZIP	COCONUT CR FL	4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and claims not qualify for the exemption stated in Section 119.07(3)(B), 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Rebecca A. Tooley, Sec.

Rebecca A. Tooley 6/7/95

305 972 5923

SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

Date

Daytime Phone #