2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N0000006597

1. Entity Name

LAUDERHILL WOMEN'S CLUB, INC.



FILED Feb 21, 2003 8:00 am Secretary of State

02-21-2003 90830 043 ****70.00

rincipal Place of Business M1 NW 24 ST NUDERHILL FL 33313		Mailing Address 4211 NW 24 ST LAUDERHILL FL 33313			1.130/f/R? All 00/	14 00 741 00 141 00 414 00 141 0	Duk 10 13 1 (1 131) 8 31 13 (8\$11 !181 }83 }	
. Principal P	lace of Business	3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State	9	City & State			4. FEI Number 59	4. FEI Number 59-1318090		Applied For Not Applicable	
Zip	Country Zip		Country		5. Certificate of Sta	atus Desired 🔯	\$8.75 Ad Fee Require	ditional	
	6. Name and Address of Curre	nt Registered Agent			7. Name and Add	ress of New Registe	red Agent		
		* *		Name					
	MARGARET			Street Addres	ss (P.O. Box Number is N	lot Acceptable)			
4211 NW	24 51 HLL FL 33313		}		-	<u></u>			ł
D (ODE)	1 2 303 13			City			FL Zip Cod	de	
	named entity submits this statement ions of registered agent.	for the purpose of changing its r	registere	ed office or regis	stered agent, or both, in t	he State of Florida. I	l am familiar with	, and accept	
IGNATURE .	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE:	: Registered	d Agent signature requ	uired when reinstating)	D.	ATE		
FILE NOW: FEE IS \$61.25 9. Election Campa Trust Fund Con					\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State			•
0.	OFFICERS AND DIRECTORS				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				_
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2. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Mornarywet Paters

2-18-03 (954)485-1776