

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Apr 23, 1999 8:00 am**  
**Secretary of State**

04-23-1999 90079 017 \*\*\*\*61.25

DOCUMENT # **N00169**

1. Corporation Name

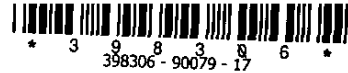
**BROWARD COUNTY CHAPTER NATIONAL ASSOCIATION OF WOMEN BUSINESS OWNERS, INC.**

Principal Place of Business

2601 E OAKLAND PARK BLVD  
#502  
OAKLAND PARK FL 33306  
US

Mailing Address

2601 E OAKLAND PARK BLVD  
#502  
OAKLAND PARK FL 33306  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

12/05/1983

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional--  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

WEINER, LAURA R., CPA  
2601 E OAKLAND PARK BLVD  
SUITE 502  
FORT LAUDERDALE FL 33306

10. Name and Address of New Registered Agent

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME ZAUMEYER, CAROLYN  
STREET ADDRESS 4540 N FEDERAL HWY  
CITY-ST-ZIP FT LAUDERDALE FL 33308 ☒ DELETE

TITLE VPD  
NAME PANTANELLA, THERESA  
STREET ADDRESS 1402 E LAS OLAS BLVD #507  
CITY-ST-ZIP FT LAUDERDALE FL 33301 ☒ DELETE

TITLE SD  
NAME LEVENTHAL, SUSAN  
STREET ADDRESS 242 WILDWOOD LN EAST  
CITY-ST-ZIP DEERFIELD BCH FL 33442 ☒ DELETE

TITLE TD  
NAME MENDEL, JILL E  
STREET ADDRESS 2509 N ANDREWS AVE  
CITY-ST-ZIP FT LAUDERDALE FL 33311 ☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition  
1.2 NAME PANTANELLA, THERESA  
1.3 STREET ADDRESS 1371 S. OCEAN BLVD.  
1.4 CITY-ST-ZIP POMPAHO BCH, FL 33062

2.1 TITLE VPD ☒ Change ☐ Addition  
2.2 NAME SUSAN LEVENTHAL  
2.3 STREET ADDRESS 242 WILDWOOD LANE EAST  
2.4 CITY-ST-ZIP DEERFIELD BCH, FL 33442

3.1 TITLE SD ☒ Change ☐ Addition  
3.2 NAME ~~SD~~ VILK-SHAPIRO / DORA  
3.3 STREET ADDRESS 815 S. UNIVERSITY DRIVE #102  
3.4 CITY-ST-ZIP PLANTATION, FL 33324

4.1 TITLE TD ☒ Change ☒ Addition  
4.2 NAME JILL MENDEL, JILL E.  
4.3 STREET ADDRESS 27 E. PROSPECT RD.  
4.4 CITY-ST-ZIP OAKLAND PARK FL 33334

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

*Jill E. MenDEL*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-19-99 351-2002

CR2E037 (1/98)