

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009942

FILED
Aug 17, 2004
Secretary of State**Entity Name:** SOUTH PALM BEACH COUNTY CHAPTER OF THE NATIONAL COALITION OF 100 BLACK WOMEN, INC.**Current Principal Place of Business:**503 CLEAR LAKE AVENUE
WEST PALM BEACH, FL 33401**New Principal Place of Business:**15112 TALL OAK AVENUE
DELRAY BEACH, FL 33446**Current Mailing Address:**503 CLEAR LAKE AVENUE
WEST PALM BEACH, FL 33401**New Mailing Address:**15112 TALL OAK AVENUE
DELRAY BEACH, FL 33446**FEI Number:** 41-2068883**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**YOUNG, CAROLYN L
15112 TALL OAK AVE
DELRAY BEACH, FL 33446 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:** P () Delete
Name: ROBINSON, DORIS P
Address: 6858 FINAMORE CIRCLE
City-St-Zip: LAKE WORTH, FL 33467**Title:** VP () Delete
Name: GIRTMAN, BLANCHE
Address: 912 NW 3RD STREET
City-St-Zip: BOYNTON BEACH, FL 33435**Title:** VP (X) Delete
Name: WRIGHT, DEBORAH
Address: 2210 NW 10TH PLACE
City-St-Zip: DELRAY BEACH, FL 33445**Title:** VP (X) Delete
Name: TAYLOR, BARBARA
Address: 11211 SOUTH MILITARY TRAIL #3422
City-St-Zip: BOYNTON BEACH, FL 33436**Title:** S () Delete
Name: BOONE, VIDA
Address: 930 NW 38TH TERRACE
City-St-Zip: DELRAY BEACH, FL 33445**Title:** T () Delete
Name: YOUNG, CAROLYN L
Address: 15112 TALL OAK AVENUE
City-St-Zip: DELRAY BEACH, FL 33446**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
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City-St-Zip:**Title:** () Change () Addition
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City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: CAROLYN L. YOUNG

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08/17/2004

Electronic Signature of Signing Officer or Director

Date