## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # NO3452

12434 NW 10TH COURT

ANDRON, JILL F

CORAL SPRINGS FL 33071

10205 CARACAS STREET

COOPER CITY FL 33026

AMERICAN WOMAN'S SOCIETY OF CERTIFIED PUBLIC ACC OUNTANTS OF BROWARD COUNTY, INC.

Principal Place of Business Mailing Address C/O MARY F. CHEANEY C/O MARY F. CHEANEY 16855 NE 2 AVE. #304 16855 NE 2 AVE. #304 N. MIAMI BEACH FL 33162 N. MIAMI BEACH FL 33162 3. Date Incorporated or Qualified 3a. Date of Last Report 10/30/1995 06/05/1984 Applied For 2a. Mailing Address 4. FEI Number 2. Principal Place of Business 59-2468087 Not Applicable 26 c/o Jill Andron c/o Jill F. Andron \$8.75 Additional Suite, Apt. #, etc. 10205 Caracas Street Suite, Apt. #, etc.
10205 Caracas Street 5. Certificate of Status Desired Fee Required \$5.00 May Be City & State City & State 6. Election Campaign Financing Cooper City, FL 33026 Trust Fund Contribution Added to Fees FL 33026 28 23 Cooper City, 8. This corporation has liability for intangible tax\_under s. 199.032, Country Country Zip Yes 2 Yo 30 Florida Statutes 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Jill F. Andron Street Address (P.O. Box Number is Not Acceptable) CHEANEY, MARY F. **B2** 10205 Caracas Street 16855 NE 2 AVE. #304 83 N. MIAMI BEACH FL 33162 Cooper City, FL 33026 85 Zip Code 84 City 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 p (NOTE: Registered Agent signature required when reinstating) ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. Change Addition DELETE 1.1 TITLE TITLE HENDERSON, DEBORA K 1.2 NAME NAME 2121 SW 28 WAY 1.3 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33312 1.4 CITY-ST-ZIP C(TY-ST-ZIP PD Change Addition DELETE 21 TITLE TITLE CHEANEY, MARY F 22 NAME NAME 16855 NE 2 AVE. #304 2.3 STREET ADDRESS STREET ADDRESS N MIAMI BEACH FL 33162 2. 4 CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE TD 3 1 TITLE TITLE SIBERSKI, PATRICIA A 3 2 NAME NAME

\*\*\*61.25 6 4 CITY - ST - ZIP CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 leceiver 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.

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5 4 CITY - ST - ZIP

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3.4. CITY-ST-ZIP

4.1 TITLE

4 2 NAME

5.1 TITLE

5.2 NAME

6 1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

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CITY - ST - ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

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NAME

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NAME

Mu BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER O

DELETE

DELETE

DELETE

**Grace Moses** 

12206 Melissa Way, Cooper City FL

000001828380

-05/20/96--01024--018

Change

(12/95) CR2E037

☐ Addition

Addition

Addition