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Apr 30 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N06078 (2)

1. Corporation Name

THE SOUTH PALM BEACH COUNTY WOMEN'S EXECUTIVE CL
UB, INC.

Principal Place of Business

P.O. BOX 372
BOCA RATON FL 33429
US

Mailing Address

P.O. BOX 372
BOCA RATON FL 33429-0372
US

3. Date Incorporated or Qualified
11/08/1984

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip

Country

2a. Mailing Address

25 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number
59-2583735

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

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

WAYT, JUDITH A
2300 GLADES RD STE 155W
BOCA RATON FL 33431

81 Name
Susan J Brotman

82 Street Address (P.O. Box Number is Not Acceptable)
2424 N Federal Hwy, Suite 314

84 City
Boca Raton

85 Zip Code
FL 33431

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 *Susan J Brotman* Susan J Brotman

4/18/97

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE
NAME HEINLY, JEAN N
STREET ADDRESS 2905 SALERNO WAY
CITY-ST-ZIP DELRAY BEACH FL

1.1 TITLE DV ☐ Change ☒ Addition
1.2 NAME Koch, Sybilla
1.3 STREET ADDRESS c/o 2255 Glades Rd, #412-E
1.4 CITY-ST-ZIP Boca Raton, FL 33431

TITLE DV ☐ DELETE
NAME BROTMAN, SUSAN J.
STREET ADDRESS 2424 N. FED. HWY., STE 314
CITY-ST-ZIP BOCA RATON FL

2.1 TITLE DP ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS Boca Raton, FL 33431
2.4 CITY-ST-ZIP

TITLE DT ☐ DELETE
NAME FRIEDMAN, ILENE
STREET ADDRESS 741 ST. ALBANS DR.
CITY-ST-ZIP BOCA RATON FL

3.1 TITLE DS ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS Boca Raton, FL 33486
3.4 CITY-ST-ZIP

TITLE DP ☐ DELETE
NAME WAYT, JUDITH A
STREET ADDRESS 2300 GLADES RD STE 155W
CITY-ST-ZIP BOCA RATON FL

4.1 TITLE D ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE SD ☐ DELETE
NAME WEAVER, MARIBETH
STREET ADDRESS 4069 PALM FOREST DRIVE NORTH
CITY-ST-ZIP DELRAY BEACH FL

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE DT ☐ Change ☒ Addition
6.2 NAME Sally Kneiser
6.3 STREET ADDRESS c/o 4000 N Federal Hwy
6.4 CITY-ST-ZIP Boca Raton, FL 33431

14. I do 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.

SIGNATURE *Judith A. Wayt* JUDITH A. Wayt

4/18/97

(561) 368-0122

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0041912

CR2E037 (9/96)