

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06078

FILED
Mar 14, 2006
Secretary of State

Entity Name: THE SOUTH PALM BEACH COUNTY WOMEN'S EXECUTIVE CLUB, INC.

Current Principal Place of Business:

P.O. BOX 372
BOCA RATON, FL 33429 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 372
BOCA RATON, FL 33429 US

New Mailing Address:

FEI Number: 59-2583735

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KATZ, EILEEN B
8555 EAGLE RUN DRIVE
BOCA RATON, FL 33434 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: PPD () Delete
Name: ZATZ, SHERI
Address: 118 NE 2ND STREET
City-St-Zip: BOCA RATON, FL 33432

Title: VPD () Delete
Name: UTTERBACK, DANA LEE
Address: 5621-C COACH HOUSE CIRCLE
City-St-Zip: BOCA RATON, FL 33486

Title: PD () Delete
Name: PERRY, ANITA
Address: 5951 WELLESLEY PARK DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: SD () Delete
Name: BROTMAN, SUSAN J
Address: 2424 N FEDERAL HIGHWAY
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 Chapter 119, 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: EILEEN B KATZ

OD

03/14/2006

Electronic Signature of Signing Officer or Director

Date