FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # N19228 (8)

1. Corporation Name

GREATER FORT LAUDERDALE FLORIDA CHAPTER OF THE N ATIONAL ASSOCIATION OF WOMEN IN CONSTRUCTION, IN

Principal Place of Business	Mailing Address
C/O JANE RAMSEY 700 N.E. 21 DR. FORT LAUDERDALE FL 33305	C/O JANE RAMSEY 700 N.E. 21 DR. FORT LAUDERDALE FL 33305

3. Date Incorporated or Qualified: 02/12/1987
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business — 21: MADELINE THOMPSON
2a. Mailing Address — 26: 8020 HAMPTON BLVD (105)

22: Suite, Apt. #, etc.
27: Suite, Apt. #, etc.

23: City & State: NORTH LAUDERDALE
28: City & State: FLORIDA

24: Zip: 33068 — 25: Country: BROWARD
29: Zip: 33068 — 30: Country: BROWARD

4. FEI Number: 59-6177674 ☐ 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

BRADY, PATRICIA
11400 NW 21 CT.
PLANTATION FL 33323

10. Name and Address of New Registered Agent

81 Name: MADELINE THOMPSON
82 Street Address (P.O. Box Number is Not Acceptable): 8020 HAMPTON BLVD 105
83:
84 City: NORTH LAUDERDALE FL — 85 Zip Code: 33068

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: Madeleine Thompson — 4/28/96
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD RAMSEY, JANE 700 NE 21 DR. FT LAUDERDALE FL 33305	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	PD GENTILE, MELINDA 3319 NE 18TH STREET FT LAUDERDALE, FL 33305	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD THOMAS, TAMMY 2261 NW 70 LANE MARGATE FL 33063	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	600001854826 -06/07/96--01009--014 ***61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD THOMPSON, MADELINE 8020 HAMPTON BLVD. #105 NORTH LAUDERDALE FL 33068	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	SD BROWN, HERMAN 2749 SW 8TH STREET FT LAUDERDALE, FL #33312	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BRADY, PATRICIA 11400 N.W. 21 CT. PLANTATION FL 33323	☒ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	TD M THOMPSON, MADELINE 8020 HAMPTON BLVD 105 NORTH LAUDERDALE, FL 33068	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PARDELL, MELANIE 210 S. FEDERAL HWY #302 HOLLYWOOD FL 33020	☒ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	D GROSSMAN, SUSANA 1690 SO CONGRESS AVE #200 DELRAY BEACH, FL 33445	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GENTILE, MELINDA 3319 NE 18 ST. FT LAUDERDALE FL 33305	☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	D RAMSEY , JANE 700 NE 21ST DRIVE FT LAUDERDALE, FL 33305	☒ Change ☐ Addition 4-6-96

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)(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: Madeleine Thompson — 4/28/96 — (954) 563-0509
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #

CR2E037 (12/95)