

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 04, 2000 8:00 am
Secretary of State
 03-04-2000 90021 013 ****61.25

DOCUMENT # N20305

1. Entity Name

ITALIAN AMERICAN WOMEN'S CLUB OF BROWARD COUNTY,

Principal Place of Business

Mailing Address

C/O SHIRLEY CASEY
 2300 S.W. 112TH AVENUE
 DAVIE FL 33325

C/O SHIRLEY CASEY
 2300 S.W. 112TH AVENUE
 DAVIE FL 33325-4815

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0193228

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CASEY, SHIRLEY
 2300 S.W. 112TH AVENUE
 DAVIE FL 33325

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GESINO, BARBARA 1425 S. 24TH COURT HOLLYWOOD FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GESINO, BARBARA 1425 S 24TH COURT HOLLYWOOD FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CASEY, SHERRY 2300 SW 112 AVE DAVIE FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RUSSO, FRANCES 6391 HARDING STREET HOLLYWOOD FL	Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Patricia Doster 9910 N. Oak Knoll Circle Ft. Lauderdale, FL 33324	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Josephine Galasso 12982 NW 6th Ct Pembroke Pines, FL 33028	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Sherry Casey 2300 SW 112 Ave. Davie, FL 33325	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Frances Russo 6391 Harding Street Hollywood, FL 33024	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sherry Casey Treasurer 2/28/00

Date

Daytime Phone #

CR2E037 (9/99)