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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT
1995

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

DOCUMENT # **N23668** **(9)**

1. Corporation Name
ST. PETERSBURG WOMAN'S CLUB

Principal Place of Business	Mailing Address
40 SNELL ISLE BLVD N.E. ST. PETERSBURG FL 33704	40 SNELL ISLE BLVD N.E. ST. PETERSBURG FL 33704

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/01/1987
3a. Date of Last Report: 02/03/1994
4. FEI Number: 59-0582246 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

SAPSER, MARY E.
5271 D BEACH DRIVE SE
ST. PETERSBURG FL 33705

10. Name and Address of New Registered Agent

81 Name: TILLIE ISLEY
82 Street Address (P.O. Box Number is Not Acceptable): 40 SNELL ISLE BLVD. NE
83
84 City: ST. PETERSBURG FL 85 Zip Code: 33704

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Tillie Isley 5/1/95
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	~~VD~~ D	11 TITLE	VD	☐ Change ☒ Addition
NAME	BAYNARD, FAY	12 NAME	Mary Skwarek	
STREET ADDRESS	618 MONTEREY BLVD, N.E.	13 STREET ADDRESS	40 Snell Isle Blvd. NE	
CITY-ST-ZIP	ST. PETERSBURG FL	14 CITY-ST-ZIP	St. Petersburg, Fl 33704	
TITLE	~~VD~~ PD	21 TITLE	VD	☐ Change ☒ Addition
NAME	MCKERNAN, MONA	22 NAME	Joni Beller	
STREET ADDRESS	6807-B 16 ST NE	23 STREET ADDRESS	40 Snell Isle Blvd. NE	
CITY-ST-ZIP	ST. PETERSBURG FL	24 CITY-ST-ZIP	St. Petersburg, Fl 33704	
TITLE	VD	31 TITLE	VD	☐ Change ☒ Addition
NAME	DAWSON, MARGARET	32 NAME	Joanne Walker	
STREET ADDRESS	1695 BRIGTWATERS BLVD NE	33 STREET ADDRESS	40 Snell Isle Blvd. NE	
CITY-ST-ZIP	ST. PETERSBURG FL	34 CITY-ST-ZIP	St. Petersburg, Fl 33704	
TITLE	~~SD~~	41 TITLE	TD	☐ Change ☒ Addition
NAME	~~MCCUNE, BERNICE~~	42 NAME	Tilley Isley	
STREET ADDRESS	~~4710 BAY ST NE~~	43 STREET ADDRESS	40 Snell Isle Blvd. NE	
CITY-ST-ZIP	~~ST. PETERSBURG FL~~	44 CITY-ST-ZIP	St. Petersburg, Fl 33704	
TITLE	~~TD~~	51 TITLE	SD	☐ Change ☒ Addition
NAME	~~SAPSER, MARY E.~~	52 NAME	Marsha Irvin	
STREET ADDRESS	~~5271 D BEACH DRIVE~~	53 STREET ADDRESS	40 Snell Isle Blvd. NE	
CITY-ST-ZIP	~~ST. PETERSBURGE FL~~	54 CITY-ST-ZIP	St. Petersburg, Florida 33704	
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 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 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: Tillie Isley Treasurer April 6 1995 577-5795
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000181