

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N23668 (9)

1. Corporation Name

GFWC ST. PETERSBURG WOMAN'S CLUB, INC.



Principal Place of Business

40 SNELL ISLE BLVD N.E.
ST. PETERSBURG FL 33704

Mailing Address

40 SNELL ISLE BLVD N.E.
ST. PETERSBURG FL 33704

3. Date Incorporated or Qualified
12/01/1987

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

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

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

ISLEY, TILLIE
40 SNELL ISLE BLVD NE
ST. PETERSBURG FL 33704

81 Name

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

100001795241

83

04/25/96--01106--037

84 City

FL

85 Zip Code

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

Tillie Isley

(NOTE: Registered Agent signature required when terminating)

DATE

3-6-1996

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME BAYNARD, FAY
STREET ADDRESS 618 MONTEREY BLVD, N.E.
CITY-ST-ZIP ST. PETERSBURG FL

☒ DELETE

1.1 TITLE President /D
1.2 NAME Margaret Dawson
1.3 STREET ADDRESS 1695 Brightwaters Blvd NE
1.4 CITY-ST-ZIP St. Petersburg, Fl. 33704

☐ Change ☐ Addition

TITLE PD
NAME MCKERNAN, MONA
STREET ADDRESS 6807-B 16 ST NE
CITY-ST-ZIP ST. PETERSBURG FL

☒ DELETE

2.1 TITLE President- Elect
2.2 NAME Mary Barton-Skwarek /D
2.3 STREET ADDRESS 4200 14St. NE
2.4 CITY-ST-ZIP St. Petersburg, Fl. 33703

☐ Change ☐ Addition

TITLE VD
NAME DAWSON, MARGARET
STREET ADDRESS 1695 BRIGTWATERS BLVD NE
CITY-ST-ZIP ST. PETERSBURG FL

☒ DELETE

3.1 TITLE First Vice-President
3.2 NAME Joanne Walker /D
3.3 STREET ADDRESS 5631 Denver St. NE
3.4 CITY-ST-ZIP St. Petersburg, Fl 33703

☐ Change ☐ Addition

TITLE VD
NAME SKWAREK, MARY
STREET ADDRESS 40 SNELL ISLE BLVD NE
CITY-ST-ZIP ST. PETERSBURG FL

☒ DELETE

4.1 TITLE Second Vice- President
4.2 NAME Vera Brantley /D
4.3 STREET ADDRESS 2012 Michigan Ave NE
4.4 CITY-ST-ZIP St. Petersburg, Fl. 33703

☐ Change ☐ Addition

TITLE VD
NAME BELLER, JONI
STREET ADDRESS 40 SNELL ISLE BLVD NE
CITY-ST-ZIP ST. PETERSBURG FL

☒ DELETE

5.1 TITLE Third Vice -President
5.2 NAME Lou Vanderbleek /D
5.3 STREET ADDRESS 273 Bayview Drive NE
5.4 CITY-ST-ZIP St. Petersburg, Fl. 33704

☐ Change ☐ Addition

TITLE VD
NAME WALKER, JOANNE
STREET ADDRESS 40 SNELL ISLE BLVD NE
CITY-ST-ZIP ST PETERSBURG FL

☒ DELETE

6.1 TITLE Recording Secretary
6.2 NAME Lorraine Danna /D
6.3 STREET ADDRESS 779 Ponce de Leon Drive
6.4 CITY-ST-ZIP Tierra Verde, Fl. 33715

☐ Change ☐ Addition

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 199.032(4), 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-6-1996 813-577-5795

Date

Daytime Phone #

504-51-25-96

CR2E037 (12/95)