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NONPROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

(0)

WOMEN'S NETWORK OF CAPE CORAL, INC.

FILED Jan 23 1998 8:00am Secretary of State

e Incorporated or Qualifi	ed	

Principal Place	e of Busines	s	М	lailing Address				I IDDINIDI DID MƏNG DINIR I	(BID DIIDI KAN BIDII	OLDII DIBII GIGII OI	IDIA WATA FAUL
1417 DEL PRADO BLVD 1417 DEL PRADO BLVD					A B 1 1 1 2 3 3 3 3 3 3 3 3 3 3	- 100 - of					
P O BOX 214 P.O. BOX 214					3. Date incorporated or Qu	aimed					
CAPE CORAL FL 33990 CAPE CORAL FL 33990					05/04/1988 4. FEI Number		Δr	plied For			
US US					65-0037464		_ 	ot Applicable			
2. Principal P	lace of Busin	ness	28	. Mailing Addre	986				ired 🗍	\$8.75	''
21			26	-				5. Certificate of Status Des	irea 📖	Fee Re	
Suite, Apt. #, etc. Suite, Apt. #, etc.			etc.			6. Election Campaign Fina	ncing	\$5.00	May Be		
22 27						Trust Fund Contribution Added to Fees					
City & State						7. Is this nonprofit corpora	_	A	n?		
		Country		9. This perpendian away o	☐ Yes ☐ No 8. This corporation owes or has paid the current year Intangible						
24		26	29	£.1p	30	1 1		Personal Property Tax d] No
24	9. Name	and Address of Co		stered Agent	00	<u> </u>		10. Name and Address of			
			 			81	Name				
KNOLL.	MARLENE					82	Street Ar	ddress (P.O. Box Number is Not A	ccentable)		
	ORIDIAN C	T					Olivoirio	Barbaa (F.O. Box Harrison is 1401)	.осориаско,		
	ORAL FL 3					63					
						84	City			85 Zip	Code
									F		
11. Pursuant	to the provis	ions of Sections 617	7.0502 and 6	317.1508, Florid	ia Statutes, t de was auth	the above	e-named corporate	orporation submits this statement	for the purpose ov accept the a	of changing it ppointment as	ts registered registered
agent. I a	ım (a miliar w	ith, and accept the	obligations of	of, Section 617.0	0503, Florida	a Statutes	3.	oration's board of directors. I hereb	• •	•	
SIGNATURE	6	or printed name of register		e li anglicable	(AVOTE, Do	nietwod Age	not alaunah wa sa	equired when reinstating)	DATE		
12.	Signature, typeo		S AND DIRE		(1012.110	13.	ork algitatore re	ADDITIONS/CHANGES T		ND DIRECTOR	RS IN, 12
			<u> </u>								
TITLE	SD			DE	LETE	1.1 TITLE	1	SD		☐ Change	Addition
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l	DIBELL	A, KAREN 17TH TERRACE		DE	LETE			mailhot Cheryl-AN	errace	☐ Change	Addition
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Indicated on this annual report or supplied with this limit does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the informatic indicated on this annual report or suppliemental 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 lifehanged, or on an attachment with an address.

941-275-6300