

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 14, 2006 8:00 am
Secretary of State

02-22-2006 90014 010 ****61.25

DOCUMENT # N27317 1. Entity Name THE WOMAN'S CLUB OF PANAMA CITY, FLORIDA, INC.					
Principal Place of Business WOMAN'S CLUB OF P.C 350 COVE BLVD. PANAMA CITY FL 32401 US			Mailing Address 350 COVE BLVD. PANAMA CITY FL 32401 US		
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 59-1202974				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CLEMO, MERLA G 2113 W 27TH STREET PANAMA CITY FL 32405			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when filing)</small> <div style="float: right;">DATE _____</div>					
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WARE, ADELAIDE 1250 W BEACH DRIVE PANAMA CITY FL 32401 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V VAN BIBBER, NANCY 3713 MARINER DR PANAMA CITY FL 32408 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SINGLETARY, VIRGINIA 961 HUNTINGTON RD PANAMA CITY FL 32405 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CLEMO, MERLE 2113 W 27TH STREET PANAMA CITY FL 32405 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOGUE, ALICE P.O. BOX 27366 PANAMA CITY FL 32411 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JORDAN, SHIRLEY 2813 WOODMERE DR PANAMA CITY FL 32405 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: <u>Merle Clemo Treasurer</u> <u>3-10-06</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <div style="float: right;">Date Day/Jan/Feb/Mar/Apr/May/June/July/Aug/Sept/Oct/Nov/Dec</div>					



ATTACHMENT

66005011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 24, 2006

THE WOMAN'S CLUB OF PANAMA CITY, FLORIDA, INC.
350 COVE BLVD.
PANAMA CITY, FL 32401 US

Subject: ~~THE WOMAN'S CLUB OF PANAMA CITY, FLORIDA, INC.~~

Reference Number: N27317

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report has not been filed and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/JE

ANNUAL REPORTS SECTION