2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N27317

1. Entity Name

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

|--|--|

FILED Aug 19, 2003 8:00 am § Secretary of State

08-19-2003 90021 008 ****61.25

	ce of Business	Mailing Address				
WOMAN'S CLU 350 COVE BLV PANAMA CITY US	/D.	350 COVE BLVD. PANAMA CITY FL 32401 US		 	10000 (410) (40) (10) 312 4 (10)	I
2. Principal F	Place of Business	3. Mailing Address				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		CI	HECK HERE IF MAKING	CHANGES
City & Stat	te	City & State		4. FEI Number 59-	1202974	Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Stat		\$8.75 Additional Fee Required
	6. Name and Address of Current I	Registered Agent		7. Name and Addre	ss of New Registered A	Agent
g**	المنتها الأسام بمشكسا الساد المستسيم		Name 5	ANDRA- DA	المستندي عجاب مستحيرة والمراك	
SOWELL,	. HELEN			ess (P.O. Box Number is No		
	IGS ROAD		942	S LAKE P	ORBEST	_D R
	CITY FL 32401		UPP			
	0111 12 02 10 1					7: 0-1-
•	•		City Y	LNGSTOW	ル・ FL	Zip Code ・ 32466
8. The above	named entity submits this statement for	the ourpose of changing its re				
	tions of registered agent.		•			
* ,	and	71/ 71/	· \		•	}
SIGNATURE,		ar My. Ayou	<u>(</u>			
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: I	Registered Agent signature re	quired when reinstating)	DATE	<u>-</u>
•	FILE NOW: FEE IS \$61.25	9. Election Camp	aign Financing	\$5.00 May Be	Make Check	c Pavable to
After Sept	tember 10, 2003, min will be \$2			Added to Fees	Fiorida Depart	-
} -	•			1	•	
10.	OFFICERS AND DIR					
	T	ECTORS	11.	ADDITIONS/CHANGES	TO OFFICERS AND DIF	RECTORS IN 10
TITLE	P	ECTORS Delete	TITLE P	-		RECTORS IN 10 Change Addition
TITLE NAME	P PARKER, JOAN		TITLE P	ANCY PRIT	CHARN	,
NAME STREET ADDRESS	P PARKER, JOAN 105 HARBOUR PT- DRIVE		TITLE PART NAME NAME STREET ADDRESS	ANCY PRIT	CHARD	☑ Change ☐ Addition
NAME	P PARKER, JOAN		TITLE PART NAME NAME STREET ADDRESS	ANCY PRIT	CHARN	☑ Change ☐ Addition
NAME STREET ADDRESS	P PARKER, JOAN 105 HARBOUR PT- DRIVE		TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	ANCY PRIT DE HARRISON ANAMA CITY	CHARD PLACE FL 324	☑ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	P PARKER, JOAN 105 HARBOUR PT- DRIVE	⊠ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	ANCY PRIT DE HARRISON ANAMA CITY	CHARD PLACE FL 324	☑ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	P PARKER, JOAN 105 HARBOUR PT- DRIVE LYNN HAVEN FL 32444	⊠ Delete	TITLE NAME NO STREET ADDRESS CHTY-ST-ZIP DITLE NAME	ANCY PRIT DZ HARRISON ANAMA CITY MANCY PAN	CHARD PLACE FL 324	☑ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P PARKER, JOAN 105 HARBOUR PT- DRIVE LYNN HAVEN FL 32444 V PRICHARD, NANCY	⊠ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 3	ANCY PRIT DZ HARRISON ANAMA CITY ANCY PAN 1 7/3 MARINE	CHARD PLACE FL 324 BIBBER R DR	☑ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P PARKER, JOAN 105 HARBOUR PT- DRIVE LYNN HAVEN FL 32444 V PRICHARD, NANCY 102 HARRISON PLACE	⊠ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 3	ANCY PRIT DZ HARRISON ANAMA CITY ANCY PAN 1 7/3 MARINE	CHARD PLACE FL 324 BIBBER R DR	Change
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I hereby certify that the information supplied with this filling 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.