

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

FILED
Mar 17, 2003 8:00 am
Secretary of State

02-27-2003 90138 004 ****61.25

DOCUMENT # N28978

1. Entity Name

THE PASADENA WOMEN'S CLUB



Principal Place of Business

1 SUNSET DRIVE, SOUTH
ST. PETERSBURG FL 33707

Mailing Address

1 SUNSET DRIVE, SOUTH
ST. PETERSBURG FL 33707

55016815



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-0746905**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JURGENSEN, CHARLOTTE S
7100 S SHORE DR, S
S. PASADENA FL 33907

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Charlotte S. Jurgensen

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	RODES, GARBY MRS	
STREET ADDRESS	7000 DATEB PALM AVE SOUTH	
CITY-ST-ZIP	SAINT PETERSBURG FL 33707	
TITLE	S	<input type="checkbox"/> Delete
NAME	JACKSON, MRS ROBERT S J	
STREET ADDRESS	1764 65 ST N	
CITY-ST-ZIP	SAINT PETERSBURG FL 33710	
TITLE	D	<input type="checkbox"/> Delete
NAME	LIVINGSTONE, MRS DWIGHT H	
STREET ADDRESS	1151 79TH ST SO	
CITY-ST-ZIP	SAINT PETERSBURG FL 33707	
TITLE	P	<input type="checkbox"/> Delete
NAME	JURGENSEN, CHARLOTTE S	
STREET ADDRESS	7100 S. SHORE DR, S	
CITY-ST-ZIP	S. PASADENA FL 33907	
TITLE	D	<input type="checkbox"/> Delete
NAME	REGINALD, IVerson MRS	
STREET ADDRESS	7922 11 AVENUE SOUTH	
CITY-ST-ZIP	SAINT PETERSBURG FL 33707	
TITLE	D	<input type="checkbox"/> Delete
NAME	RUPPEL, MRS CLARENCE	
STREET ADDRESS	13300 INDIAN RKS RD	
CITY-ST-ZIP	LARGO FL 34644	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charlotte S. Jurgensen
President

3/4/03
Date
Daytime Phone #

CR20037 (10/02)