

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

8/29/2003-90086-011-\$61.25-\$61.25

SEP 22 PM 3:55
SECRETARY OF CORPORATION

DOCUMENT # N31601

1. Entity Name

SPRINGFIELD IMPROVEMENT ASSOCIATION AND WOMAN'S CLUB, INC.



Principal Place of Business

Mailing Address

210 W. SEVENTH ST.
JACKSONVILLE FL 32206

210 W. SEVENTH ST.
JACKSONVILLE FL 32206

2. Principal Place of Business

3. Mailing Address

210 W SEVENTH ST.

210 W SEVENTH ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

JACKSONVILLE

City & State

JACKSONVILLE

Zip

FL

Country

32206

Zip

FL

Country

32206

4. FEI Number 59-2989134

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

HALSTEAD, ADAM B
133 WEST 5TH STREET
JACKSONVILLE FL 32206

7. Name and Address of New Registered Agent

Name CHRISTINE FARLEY

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

402 E. SIXTH ST.

City

JACKSONVILLE

FL

Zip Code

32206

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

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
After September 10, 2003, min will be \$236.25

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 | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Delete |
|-------|-------------------|---------------------|-----------------------|---------------------------------|
| P | MARSH, CAROLYN | 210 WEST 7TH STREET | JACKSONVILLE FL 32206 | <input type="checkbox"/> |
| VP | HALSTEAD, ADAM B | 133 WEST 5TH STREET | JACKSONVILLE FL 32206 | <input type="checkbox"/> |
| T | FARLEY, CHRIS | 402 EAST 6TH STREET | JACKSONVILLE FL 32206 | <input type="checkbox"/> |
| S | DESPAIN, LOUISE | 404 EAST 6TH STREET | JACKSONVILLE FL 32206 | <input type="checkbox"/> |
| D | O'QUINN, SANDRA | 436 EAST 5TH STREET | JACKSONVILLE FL 32206 | <input type="checkbox"/> |
| D | ROBINSON, HELEN M | 604 SAPELO ROAD | JACKSONVILLE FL 32216 | <input type="checkbox"/> |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
|-------|-----------------|------------------|-----------------------|---|
| P | NANCY NEWMAN | 354 W 7th St | JACKSONVILLE FL 32206 | <input checked="" type="checkbox"/> |
| VP | EVA AYRES | 1843 HUBBARD ST. | JACKSONVILLE FL 32206 | <input checked="" type="checkbox"/> |
| T | CHRIS FARLEY | 402 E 6th St | JACKSONVILLE FL 32206 | <input checked="" type="checkbox"/> |
| S | SHARON OSTROSKI | 424 E 6th St | JACKSONVILLE FL 32206 | <input checked="" type="checkbox"/> |
| D | VIRGINIA NEWMAN | 232 E 2nd St | JACKSONVILLE FL 32206 | <input checked="" type="checkbox"/> |
| D | LENA CASTRO | 1217 BOULEVARD | JACKSONVILLE FL 32206 | <input checked="" type="checkbox"/> |

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

CHRISTINE FARLEY AUG. 26⁰³ 904 3551626

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E037 (4/03)