

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N33999 (6)

1. Corporation Name

GREATER OCALA WOMAN'S CLUB, INC.

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR -5 PM 2:57

Principal Place of Business

Mailing Address

**% RUBY PARKER
3800 S.W. 7TH ST.
OCALA FL 32671**

**% RUBY PARKER
3800 S.W. 7TH ST.
OCALA FL 32671**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/29/1989

3a. Date of Last Report

02/01/1994

4. FEI Number

59-2943471

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐

Yes

☐

No

2. Principal Place of Business

2a. Mailing Address

21 13 Sapphire Road

26 13 Sapphire Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

23 Ocala, Florida

City & State

28 Ocala, Florida

Zip

24 34472

Country

25 USA

Zip

29 34472

Country

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PARKER, RUBY
3800 S.W. 7TH STREET
OCALA FL 32674**

81 Name

Patricia Huml

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

13 Sapphire Road

83

84 City

Ocala

FL

85 Zip Code

34472

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, and hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Patricia Huml, President

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

(INC. E. Registered Agent signature required when reappointing)

March 21, 1995

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
PD	PARKER, RUBY	3800 SW 7TH ST	OCALA FL
VPS	JONES, VAL	8662-B S.W. 96TH LN.	OCALA FL
VPD	HUML, PAT	13 SAPPHIRE RD.	OCALA FL
VP	STENSON, KRIS	5195 N.W. 80TH AVE.	OCALA FL
S	STOUT, LORRAINE	2850 S.E. 48TH ST.	OCALA FL
T	HAMRICK, ELSIE	873 S.E. 18TH ST.	OCALA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
PD	Patricia Huml	13 Sapphire Road	Ocala, Florida 34472	☒	☐
VPS	Margaret Phillips	1851 NE 40 Circle	Ocala, Florida 34470	☒	☐
VPD	Dorothy Allen	4933 SE 40 Terrace	Ocala, Florida 34480	☒	☐
VP	Bette Johnson	1605 NE 36 Court	Ocala, Florida 34470	☒	☐
S	Nancy Newnam	311 NE 45 Terrace	Ocala, Florida 34470	☒	☐
T	Lorraine Stout	2850 SE 48th Street	Ocala, Florida 34480	☒	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption under Section 190.07(5)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

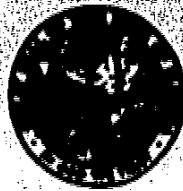
SIGNATURE:

Patricia Huml
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President March 21, 1995 904/

DATE

KEYSTAMP HERE



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 27, 1995

GREATER OCALA WOMAN'S CLUB, INC.
13 SAPPHIRE ROAD
OCALA, FL 34472

SUBJECT: GREATER OCALA WOMAN'S CLUB, INC.
Ref. Number: N33999

We have received your Annual Report; however, the document has not been filed and is being returned for the following:

The fee to file the enclosed annual report is \$130.00. If a certificate of status is desired, please add an additional \$8.75.

After the corrections have been made 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 Annual Report Section at (904) 487-6056.

Thank you,

Reginald Colston
ANNUAL_REPORTS Section

Letter number: 495A00013789