4/27/98 B-5708 C

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Apr 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1998**

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

DOCUMENT # N35326 (0)

1. Corporation Name

UMATILLA WOMAN'S CLUB, INC.

Principal Place of Business	Mailing Address
COMMUNITY CENTER 2 CENTER ST. UMATILLA FL 32784	P.O. BOX 1772 UMATILLA FL 32784 US

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

3. Date Incorporated or Qualified: 11/22/1989

4. FEI Number: 59-1895424 ☐ 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. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WRIGHT, BARBARA
20314 WOOD DUCK RD.
ALTOONA FL 32702

10. Name and Address of New Registered Agent

81 Name: Margeret Stricklen
82 Street Address (P.O. Box Number is Not Acceptable): P.O.Box 661
83: 20020 East Highway 42
84 City: Umatilla FL 85 Zip Code: 32784

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: President - Margeret Stricklen Margeret D. Stricklen 4/16/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☒ DELETE	1.1 TITLE	DP	☒ Change ☐ Addition
NAME	WRIGHT, BARBARA		1.2 NAME	Margeret Stricklen	
STREET ADDRESS	20314 WOOD DUCK RD.		1.3 STREET ADDRESS	P.O.Box 661	
CITY-ST-ZIP	ALTOONA FL 32702		1.4 CITY-ST-ZIP	Umatilla, Fl. 32784	
TITLE	VD	☒ DELETE	2.1 TITLE	VD	☒ Change ☐ Addition
NAME	WHITE, AGNES		2.2 NAME	Edith Gardner	
STREET ADDRESS	42121 PINE VALLEY DR		2.3 STREET ADDRESS	17646 Willis V. McCall Rd.	
CITY-ST-ZIP	PAISLEY FL		2.4 CITY-ST-ZIP	Umatilla, Fl. 32784	
TITLE	VP	☒ DELETE	3.1 TITLE	VP	☒ Change ☐ Addition
NAME	DAVIS, HELEN		3.2 NAME	Una Ward	
STREET ADDRESS	2633 BROOKSIDE COURT		3.3 STREET ADDRESS	25632 Fishermans Rd.	
CITY-ST-ZIP	MOUNT DORA FL		3.4 CITY-ST-ZIP	Paisley, Fl. 32767	
TITLE	S	☒ DELETE	4.1 TITLE	S	☒ Change ☐ Addition
NAME	HAYLETT, HELEN		4. 2 NAME	Virginia Shelton	
STREET ADDRESS	45811 DEER STREET		4.3 STREET ADDRESS	17041 Peru Road	
CITY-ST-ZIP	PAISLEY FL		4.4 CITY-ST-ZIP	Umatilla, Fl. 32784	
TITLE	TD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	RAYBUCK, SARA		5.2 NAME	Same	
STREET ADDRESS	87 LIVE OAK DR.		5.3 STREET ADDRESS		
CITY-ST-ZIP	EUSTIS FL 32726		5.4 CITY-ST-ZIP		
TITLE	CS	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	EMERSON, GERALDINE		6.2 NAME	Same	
STREET ADDRESS	P.O. BOX 1330 N/A		6.3 STREET ADDRESS		
CITY-ST-ZIP	UMATILLA FL		6.4 CITY-ST-ZIP		

CR2E037 (10/97)

14. 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Sara Jane Raybuck Sara Jane Raybuck 352-357-6114