

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N35326

1. Entity 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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1895424

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CLINE, LYNN
1040 ELK COURT N
WINTER SPRINGS FL 32708

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.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
CLINE, LYNN
1040 ELK COURT N
WINTER SPRINGS FL 32708 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
WEBB, JUANITA
47109 BEAR CLAW ROAD
ALTOONA FL 32702 ☒ Delete ☒

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
McCall, Joyce
592 Crescent St.
Umatilla, Fl. 32784 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
CROWNOVER, GLETA
450 E COLLINS STREET
UMATILLA FL 32784 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
Doyle, Shirley
16601 Orange Ave.
Umatilla, Fl. 32784 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
SHELTON, VIRGINIA
17041 PERU ROAD
UMATILLA FL 32784 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
MOCK, MARY JANE
PO BOX 569 N/A
UMATILLA FL 32784 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
Day, Mary
18144 Tuck-A-Way Lane
Umatilla, Fl. 32784 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CS
EMERSON, GERALDINE
P.O. BOX 1330 N/A
UMATILLA FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

Shirley Doyle
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 29, 02

352-357-6690

Daytime Phone #

CR2E037 (9/01)

UBR/603

FILED
May 29, 2002 8:00 am
Secretary of State

05-29-2002 90716 023 ****61.25

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DO NOT WRITE IN THIS SPACE