

4-10-95 8-3289-XC
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**CORPORATION
ANNUAL REPORT
1995**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 10 PM 12:19

DOCUMENT # N35624 (8)

1. Corporation Name

THE WOMAN'S CLUB OF EUSTIS, INC.

Principal Place of Business

Mailing Address

C/O LAWRENCE J. SEMENTO
531 NORTH BAY ST.
EUSTIS FL 32726
US

% LAWRENCE J. SEMENTO
531 NORTH BAY ST
EUSTIS FL 32726
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/08/1989

3a. Date of Last Report

04/15/1994

4. FEI Number

59-2082137

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

21 327 N. CENTER ST

26 P.O. Box 57A

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 EUSTIS FL

City & State

28 EUSTIS FL

Zip

24 32726

Country

25 LAKE

Zip

29 32726

Country

30 LAKE

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SEMENTO, LAWRENCE J.
531 N. BAY STREET
EUSTIS FL 32726

81 Name

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

83

84 City

FL

85 Zip Code

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME SIEGEL, LONA R
STREET ADDRESS 2635 LAKE LANDING BLVD.
CITY - ST - ZIP EUSTIS FL 32738-6949

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE V
NAME FRANZAN, RUTH
STREET ADDRESS 305 TURQUOISE WAY
CITY - ST - ZIP EUSTIS FL 32726

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE V
NAME GRUNEWALD, LOURIE
STREET ADDRESS 1165 LAKE DR.
CITY - ST - ZIP GRAND ISLAND FL 32735

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE D
NAME YOWLER, PAULINE
STREET ADDRESS 216 MAGNOLIA LANE
CITY - ST - ZIP EUSTIS FL 32726

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE D
NAME MABRY, LILA
STREET ADDRESS 1030 GROVE ST.
CITY - ST - ZIP EUSTIS FL 32726

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE Y
NAME HENNING, JOAN L
STREET ADDRESS 2713 WASHINGTON AVE
CITY - ST - ZIP EUSTIS FL

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(g), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Here

4-3-95

589-7808