

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 20, 2002 8:00 am
Secretary of State

05-20-2002 90045 002 ****61.25

DOCUMENT # N35624

1. Entity Name

THE WOMAN'S CLUB OF EUSTIS, INC.

Principal Place of Business

Mailing Address

227 N CENTER ST
 EUSTIS FL 32726
 US

P O BOX 572
 EUSTIS FL 32727
 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

59-2982137

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

RAYBUCK, SARA JANE
87 LIVE OAK DRIVE
EUSTIS FL 32726

Name

LONA SIEGEL

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

2730 TREMONT DR.

City

EUSTIS

FL

Zip Code

32726

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

Lona Siegel, President

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

(NOTE: Registered Agent signature required when reinstating)

4/26/02

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 PD ☒ Delete
 NAME RAYBUCK, SARA JANE
 STREET ADDRESS 87 LIVE OAK DRIVE
 CITY-ST-ZIP EUSTIS FL 32726

TITLE P-D ☒ Change ☐ Addition
 NAME LONA SIEGEL
 STREET ADDRESS 2730 TREMONT DR
 CITY-ST-ZIP EUSTIS FL 32726

TITLE VPD ☒ Delete
 NAME SIEGEL, LONA
 STREET ADDRESS 2730 TREMONT DR
 CITY-ST-ZIP EUSTIS FL 32726

TITLE VP-D ☒ Change ☐ Addition
 NAME KATHY CLEVELAND
 STREET ADDRESS 2639 LAKE LANDING BLVD
 CITY-ST-ZIP EUSTIS FL 32726

TITLE VP ☒ Delete
 NAME CLEVELAND, KATHY
 STREET ADDRESS 2639 LAKE LANDING BLVD
 CITY-ST-ZIP EUSTIS FL 32726

TITLE RS-D ☒ Change ☐ Addition
 NAME SANDRA BEATTY
 STREET ADDRESS 36707 ANTOINE DR
 CITY-ST-ZIP GRAND ISLAND FL 32735

TITLE RSD ☒ Delete
 NAME COMPTON, CHARLOTTE
 STREET ADDRESS 220 N. HAWLEY ST
 CITY-ST-ZIP EUSTIS FL 32726

TITLE CS ☒ Change ☐ Addition
 NAME BETTY LONG
 STREET ADDRESS 36719 ANTOINE DR
 CITY-ST-ZIP GRAND ISLAND FL 32735

TITLE CS ☒ Delete
 NAME LUNN, JUANITA
 STREET ADDRESS 2706 DELLWOOD DR S
 CITY-ST-ZIP EUSTIS FL 32726

TITLE D ☒ Change ☐ Addition
 NAME SARA JANE RAYBUCK
 STREET ADDRESS 87 LIVE OAK DR
 CITY-ST-ZIP EUSTIS FL 32726

TITLE T ☐ Delete
 NAME CONWAY, JEAN
 STREET ADDRESS 12310 S PUTNEY CT
 CITY-ST-ZIP LEESBURG FL 34788

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

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:

Lona Siegel **REQUIRED**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/02
 Date

352-589-7411
 Daytime Phone #

CR2E037 (9/01)