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FILED

Jan 23 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N36823 (5)

1. Corporation Name

BOYNTON WOMAN'S CLUB



Principal Place of Business

Mailing Address

P.O. BOX 1135  
BOYNTON BEACH FL 33425P.O. BOX 1135  
BOYNTON BEACH FL 33425-11353. Date Incorporated or Qualified  
02/23/19903a. Date of Last Report  
05/01/1996

2. Principal Place of Business

21 1010 South Federal Highway

2a. Mailing Address

Suite, Apt. #, etc.

22 City &amp; State

23 Zip

24 33435

Country

25

Suite, Apt. #, etc.

26

City &amp; State

27

Zip

28

Country

29

30

4. FEI Number  
59-6134516Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida StatutesYes ☐ No ☒

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ZIMMERMAN, JANE  
122 N.W. 14TH STREET  
BOYNTON BEACH FL 33426

81 Name

Irene Feeney

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

800 Canary Walk

83

84 City

Gulfstream

FL

85 Zip Code

33483

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

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

(Not E. Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VPD  
NAME BUFFAN, LEE  
STREET ADDRESS 2563 SW 10TH STREET  
CITY-ST-ZIP BOYNTON BEACH FL  
DELETE1.1 TITLE TREASURER  
1.2 NAME KATHERINE R. CONCORAN  
1.3 STREET ADDRESS 215 S.W. 3rd STREET  
1.4 CITY-ST-ZIP BOYNTON BEACH, FL 33435  
Change ☐ Addition ☒TITLE VPD  
NAME WHITE, JOAN  
STREET ADDRESS 295-D MAIN BLVD  
CITY-ST-ZIP BOYNTON BEACH FL 33435  
DELETE2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
Change ☐ Addition ☐TITLE PD  
NAME FEENEY, IRENE  
STREET ADDRESS 800 CANARY WALK  
CITY-ST-ZIP GULFSTREAM FL  
DELETE3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
Change ☐ Addition ☐TITLE VPD  
NAME LIAROS, SOPHIA  
STREET ADDRESS 101 LEISURE LAKE CIR. #107  
CITY-ST-ZIP BOYNTON BEACH FL 33426  
DELETE4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
Change ☐ Addition ☐TITLE RS  
NAME THOMAS, BETTY  
STREET ADDRESS 331 SW 11TH AVE  
CITY-ST-ZIP BOYNTON BEACH FL 33435  
DELETE5.1 TITLE VPD  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
Change ☐ Addition ☒TITLE CS  
NAME ILIA, LINDSAY  
STREET ADDRESS 1220 SUSSEX ST  
CITY-ST-ZIP LANTANA FL 33462  
DELETE6.1 TITLE ASSISTANT TREASURER  
6.2 NAME Kruel, Clare  
6.3 STREET ADDRESS 2101 S.W. 20th Circle  
6.4 CITY-ST-ZIP Boynton Beach, FL  
Change ☐ Addition ☒

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

IRENE FEENEY

Date

1/10/97

Daytime Phone # 0041663

CR2E037 (9/96)