

FILE NOW: FILING FEE IS \$61.25

FILED

May 27 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N44866 (4)

1. Corporation Name

ORLANDO BUSINESS & PROFESSIONAL WOMEN'S CLUB, INC.

Principal Place of Business

1228 BRIDLEBROOK DR
CASSELBERRY FL 32707
US

Mailing Address

PO BOX 180476
CASSELBERRY FL 32718-0476
US3. Date Incorporated or Qualified
08/21/19913a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HUFF, SANDRA M.
1228 BRIDLEBROOK RD
CASSELBERRY FL 32707

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DV LADAN, ZELDA ☒ DELETENAME
STREET ADDRESS
CITY - ST - ZIP
4853 TIFFANY WOODS CIR.
OVIEDO FLTITLE DS ☐ DELETENAME
STREET ADDRESS
CITY - ST - ZIP
HUFF, SANDRA M
1228 BRIDLEBROOK RD
CASSELBERRY FLTITLE DP ☐ DELETENAME
STREET ADDRESS
CITY - ST - ZIP
RYAN, DEBORAH
682 TRINIDAD CT
WINTER PARK FLTITLE DT ☒ DELETENAME
STREET ADDRESS
CITY - ST - ZIP
PRESLEY, CHRIS
2014 SO CHICKASAW TRAIL
ORLANDO FLTITLE ☐ DELETENAME
STREET ADDRESS
CITY - ST - ZIPTITLE ☐ DELETENAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DTS Janet M. Helms ☐ Change ☒ Addition1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
336 Little Springs LN
LONGWOOD, FL 327502.1 TITLE DP ☒ Change ☐ Addition2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP3.1 TITLE DV ☒ Change ☐ Addition3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP4.1 TITLE DV ☐ Change ☒ Addition4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
Julie A. Gelder
1401 Summer Wind Dr
Winter Park, FL 327925.1 TITLE ☐ Change ☐ Addition5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP6.1 TITLE ☐ Change ☐ Addition6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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, changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0013296

CR2E037 (9/96)