

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90204 028 ****61.25

0064694

DOCUMENT # N50493

1. Corporation Name

BONITA SPRINGS WOMAN'S CLUB, INC.

Principal Place of Business

10540 CHILDERS AVE.
~~SUITE 104~~
BONITA SPRINGS FL 34133
US

Mailing Address

POST OFFICE BOX 443
~~SUITE 104~~
BONITA SPRINGS FL 34133
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 *Not used*

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 *Not used*

28 City & State

29 Zip

30 Country

3. Date Incorporated or Qualified

08/21/1992

4. FEI Number

59-6134517

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

9. Name and Address of Current Registered Agent

RICHARDSON, RALPH A.
27725 OLD 41 RD
SUITE 104
BONITA SPRINGS FL 33923

10. Name and Address of New Registered Agent

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 *Blanche Mazzucco Tru...*

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

(NOTE: Registered Agent signature required when reinstating)

2/12/99

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME PD
LEAMER, MARY
STREET ADDRESS 10451 BINKY LANE
CITY-ST-ZIP BONITA SPRINGS FL

TITLE ☐ DELETE

NAME VD
VERWEY, BETTY
STREET ADDRESS 27526 GARRETT ST.
CITY-ST-ZIP BONITA SPRINGS FL 34135

TITLE ☐ DELETE

NAME TD
MAZZUCCO, BLANCHE
STREET ADDRESS 27081 HARBOR DRIVE
CITY-ST-ZIP BONITA SPRINGS FL

TITLE ☒ DELETE

NAME SD
MENG, EVELYN
STREET ADDRESS 27333 HORNE AVE.
CITY-ST-ZIP BONITA SPRINGS FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME PD
Verwey Betty
1.3 STREET ADDRESS 20750 Country Barn Dr.
1.4 CITY-ST-ZIP Estero FL. 33928

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME VD
Wright Gladys
2.3 STREET ADDRESS 25829 Buttercup Ct.
2.4 CITY-ST-ZIP Bonita Springs FL. 34135

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME TD
Mazzucco Blanche
3.3 STREET ADDRESS 27081 Harbor Drive
3.4 CITY-ST-ZIP Bonita Springs FL. 34135

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME SD
Boles Gladys
4.3 STREET ADDRESS 27670 Saffridge Dr
4.4 CITY-ST-ZIP Bonita Springs FL. 34135

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME 2nd. VD
Burnadean Humphrey
5.3 STREET ADDRESS 27041 Lavinka St.
5.4 CITY-ST-ZIP Bonita Springs FL. 34135

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE: *Blanche Mazzucco Tru...*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/99 (941) 992-0332
Date Daytime Phone #

CR2E037 (11/98)