

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 21, 2007  
Secretary of State**

DOCUMENT# N93000000102

Entity Name: MIAMI SPRINGS WOMAN'S CLUB, INC.

**Current Principal Place of Business:**

200 WESTWARD DR.  
MIAMI SPRINGS, FL 33166 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 396  
MIAMI SPRINGS, FL 33266 US

**New Mailing Address:**

FEI Number: 23-7326302      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCCARTHY, JANA  
140 NAVAJO ST  
MIAMI SPRINGS, FL 33166 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: JESTER, NIKKI  
Address: 829 LAKE DR  
City-St-Zip: MIAMI, FL 33166

Title: T ( ) Delete  
Name: RUTH, COLLARD  
Address: 6260 NW 39 TERRACE  
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: SD ( ) Delete  
Name: PRIESS, IRENE  
Address: 449 SWALLOW DR APT 3  
City-St-Zip: MIAMI, FL 33166

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: DONLAN, EILEEN W  
Address: 801 SWAN AVENUE  
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EILEEN DONLAN

T

04/21/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date