## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

N93000002254 (1)

FLORIDA WOMEN'S STATE GOLF ASSOCIATION, INC.

## **FILED** Apr 08 1998 8:00am Secretary of State

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P	Principal Place of Business Mailing Address					I CORNEL TIE ISING WIN CONT. CONT. CONT. CONT.	11640 41801 01111 0101 1001				
1124 LAGUNA LANE GULF BREEZE FL 32561 LIS			1124 LAGUNA LANE GULF BREEZE FL 32561 US			3. Date Incorporated or Qualified 05/14/1993					
U	•		03			4. FEI Number	Applied For Not Applicable				
2. 21	Principal Place of Busin	ness	2a. Malling Address 26		59-3 185028  5. Certificate of Status Desired	- 00 TE					
22	Suite, Apt. #, etc.		Suite, Apt. #, etc.		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees					
23	City & State		City & State				7. Is this nonprofit corporation a homeowners association?				
24	Zip	Country 25	Zip	Coun:	try	8. This corporation owes or has paid the current Personal Property Tax due June 30.					
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent				
				8	11	Name					
BREMSER, GRETA 1124 LAGUNA LANE					32	Street Address (P.O. Box Number is Not Acceptable)					
				13							
				Ĭ	14	City	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 - TREASURER. 4/3/98									
SIGNATURE _	Stonature, typed or printed name of registered agent and Title #			required when reinstating) DATE	J/ 10				
12. OFFICERS AND DIRECTORS			13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	P	DELETE	1.1 TITLE	GREER, CAROLYN - P.	Change	☐ Addition			
NAME	GODINO, FLO	A.	1.2 NAME	1119 OAKDALE STREET					
STREET ADDRESS	3304 PEBBLE BEACH DR		1.3 STREET ADDRESS						
CITY-ST-ZIP	LAKE WORTH FL		1.4 CITY-ST-ZIP	WINDERMERE, FL.					
TITLE	VP .	X DELETE	2.1 TITLE TAFE	IE BRISLEY _ V.P.	Change	■ Addition			
NAME	GREER, CAROLYN		22 NAME 7106	DIVER OLUB BLUD					
STREET ADDRESS	1119 OAKDALE ST		2.3 STREET ADDRESS						
CITY-ST-29P	WINDERMERE FL		2.4 CITY-ST-ZIP	BRADENTON, FL. 34202					
TITLE	S	DELETE	3.1 TITLE		Change	☐ Addition			
NAME	CRUTCHFIELD, HARRIETT		3.2 NAME						
STREET ADDRESS	33 TREETOP CIR		3.3 STREET ADDRESS						
CITY-ST-ZIP	ORMOND BEACH FL		3.4. CITY-ST-ZIP						
TITLE	T	☐ DELETE	4.1 TITLE		Change	☐ Addition			
NAME	Bremser, Greta		4. 2 NAME						
STREET ADDRESS	1124 LAGUNA LANE		4.3 STREET ADDRESS						
CITY-ST-ZIP	Gulf Breeze Fl.		4.4 CITY - ST - ZIP						
TITLE	D	DELETE	5.1 TITLE	D	Change	Addition			
NAME	FORBES, BETTY		5.2 NAME	GODINO, FLO					
STREET ADDRESS	1311 BRIARWOOD DR		5.3 STREET ADDRESS	3304 PEBBLE BEACH DR.					
CITY-ST-ZIP	PORT ST LUCIE FL		5.4 CITY - ST - ZIP	LAKE WORTH FL.					
TITLE	D	DELETE	6.1 TITLE	D	Change	Addition			
NAME	COMELLA, JUDITH		6.2 NAME	VATLAND, KAREN	=				
STREET ADDRESS	10000 US HWY 98 #107		6.3 STREET ADDRESS	132 ANCHOR DRIVE,					

14. Thereby certify that the information supplied with this filling 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:

850-934 3395