

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham,
Secretary of State,
DIVISION OF CORPORATIONS

DOCUMENT # N93000003500
1. Corporation Name

West Pinellas National Organization For Women, Inc.

Principal Place of Business: 9209 Seminole Blvd. Unit #177 Seminole, FL 34642
Mailing Address: P. O. Box 1791 Largo, FL 34649-1791

3. Date Incorporated or Qualified: July 30, 1993
3a. Date of Last Report: Feb. 24, 1995

2. Principal Place of Business: 21 9209 Seminole Blvd. Unit #177 Seminole, FL 34642
2a. Mailing Address: 26 P. O. Box 1791 Largo, FL 34649-1791
22 City & State: Seminole, FL
23 Zip: 34642 Country: U.S.A.

4. FEI Number: 593200071
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: Toni Van Pelt, 11280 Freedom Court, Seminole, FL 34642

10. Name and Address of New Registered Agent: 81 Name: [Blank], 82 Street Address (P.O. Box Number is Not Acceptable): 000001920110, 83 City: [Blank], 84 City: ***FL.25, 85 Zip Code: FL

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] Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when installing) DATE: [Blank]

12. OFFICERS AND DIRECTORS	
TITLE: D <input checked="" type="checkbox"/> DELETE	NAME: Janice Jochum
STREET ADDRESS: 14125 Yacht Club Blvd.	CITY-ST-ZIP: Seminole, FL 34646
TITLE: D <input checked="" type="checkbox"/> DELETE	NAME: Kay Moore
STREET ADDRESS: 450 78th Avenue	CITY-ST-ZIP: St. Pete Beach, FL 33706
TITLE: D <input checked="" type="checkbox"/> DELETE	NAME: Lauren R. Penny
STREET ADDRESS: 9209 Seminole Blvd/#177	CITY-ST-ZIP: Seminole, FL 34642
TITLE: D <input checked="" type="checkbox"/> DELETE	NAME: Sandra L. Weeks
STREET ADDRESS: 9209 Seminole Blvd/#177	CITY-ST-ZIP: Seminole, FL 34642
TITLE: D <input checked="" type="checkbox"/> DELETE	NAME: Toni V. Pelt
STREET ADDRESS: 11280 Freedom Court	CITY-ST-ZIP: Seminole, FL 34642
TITLE: D <input checked="" type="checkbox"/> DELETE	NAME: Terry Rudd
STREET ADDRESS: 2563 14th Avenue SW	CITY-ST-ZIP: Largo, FL 34640

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE: Co-P/D	12 NAME: Sandra L. Weeks <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
13 STREET ADDRESS: 9209 Seminole Blvd./#177	14 CITY-ST-ZIP: Seminole, FL 34642
21 TITLE: Co-P/D	22 NAME: Kay Moore <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
23 STREET ADDRESS: 450 78th Avenue	24 CITY-ST-ZIP: St. Pete Beach, FL 33706
31 TITLE: S/D	32 NAME: Monna Bacon <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
33 STREET ADDRESS: 800 Highland Avenue South	34 CITY-ST-ZIP: Largo, FL 34640
41 TITLE: T/D	42 NAME: Terry Rudd <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
43 STREET ADDRESS: 2563 14th Avenue SW	44 CITY-ST-ZIP: Largo, FL 34640
51 TITLE: Membership/D	52 NAME: Toni VanPelt <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
53 STREET ADDRESS: 11280 Freedom Court	54 CITY-ST-ZIP: Seminole, FL 34642
61 TITLE: Herstorian/D	62 NAME: Eleanor Maas <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
63 STREET ADDRESS: 12234 Mallory Drive	64 CITY-ST-ZIP: Largo, FL 34644

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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] Terry Rudd, March 22, 1996, (813) 584-6827
Treasurer/Director

CR2E037 (12/95)