

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 30, 2003 8:00 am**  
**Secretary of State**

01-30-2003 90161 012 \*\*\*\*61.25

**DOCUMENT # N93000003500**

1. Entity Name

**WEST PINELLAS NATIONAL ORGANIZATION FOR WOMEN, I  
NC.**



Principal Place of Business

**14125 YACHT CLUB BLVD  
SEMINOLE FL 33776-1211  
US**

Mailing Address

**14125 YACHT CLUB BLVD  
SEMINOLE FL 33776-1211  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3200071**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**MOORE, KAY  
450 78TH AVE  
ST PETERSBURG BEACH FL 33706**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**St. Pete Beach**

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete  
NAME **JOCHUM, JANICE**  
STREET ADDRESS **14125 YACHT CLUB BLVD**  
CITY-ST-ZIP **SEMINOLE FL 33776-1211**

TITLE **VD** ☐ Delete  
NAME **MOORE, KAY**  
STREET ADDRESS **450 78TH AVE**  
CITY-ST-ZIP **ST PETERSBURG BEACH FL 33706-1712**

TITLE **STD** ☐ Delete  
NAME **SIMONETTI, SHARON**  
STREET ADDRESS **12800 VONN RD APT 8604**  
CITY-ST-ZIP **LARGO FL 33774**

TITLE **D** ☐ Delete  
NAME **BACON, MONNA**  
STREET ADDRESS **800 HIGHLAND AVE SOUTH**  
CITY-ST-ZIP **LARGO FL 33770**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP **St. Pete Beach**

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **3568-44 Ave. SE**  
CITY-ST-ZIP **Largo FL 33771**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Janice Jochum** **1-27-03** **727-595-2766**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)