

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 10, 2007 8:00 am
Secretary of State

08-10-2007 90047 040 ****70.00

DOCUMENT # N94000002031



1. Entity Name
NATIONAL WOMEN'S POLITICAL CAUCUS GWEN
CHERRY CHAPTER, INC.

Principal Place of Business
161 SE 13 ST
POMPANO BEACH, FL 33060 US

Mailing Address
161 SE 13 ST
POMPANO BEACH, FL 33060 US

60054511



2. Principal Place of Business - No P.O. Box #
6411 NW 58th Street

3. Mailing Address
P.O. Box 1234

08052007 Chg-NP CR2E037 (12/06)

City & State
Tamarac, FL

City & State
Pompano Beach, FL

Zip
33321-5722

Country
USA

Zip
33061-1234

Country
USA

4. FEI Number
59-2145815

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LYNN, PATTI
6411 NW 58TH STREET
FORT LAUDERDALE, FL 33321-5722

7. Name and Address of New Registered Agent

Name

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

City

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

Filing Fee is \$61.25
Due by September 14, 2007

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	D	<input checked="" type="checkbox"/> Delete
NAME	GLICKMAN, SHARON B	
STREET ADDRESS	6270 N.W. 44TH STREET	
CITY-ST-ZIP	CORAL SPRINGS, FL 33067	
TITLE	D	<input type="checkbox"/> Delete
NAME	ARMBRISTER, HAZEL	
STREET ADDRESS	1808 NE 6TH AVE	
CITY-ST-ZIP	POMPANO BEACH, FL 33060	
TITLE	D	<input type="checkbox"/> Delete
NAME	HOSTO, KAREN	
STREET ADDRESS	161 SE 13 ST	
CITY-ST-ZIP	POMPANO BEACH, FL 33060	
TITLE	VP	<input type="checkbox"/> Delete
NAME	WILLIAMSON, BARBARA	
STREET ADDRESS	2952 NW 13TH ST.	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33311	
TITLE	T	<input type="checkbox"/> Delete
NAME	LYNN, PATTI	
STREET ADDRESS	6411 NW 58 STREET	
CITY-ST-ZIP	TAMARAC, FL 333215722	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	WALDIE, DEBORRAH	
STREET ADDRESS	161 SE 13TH STREET	
CITY-ST-ZIP	POMPANO BEACH, FL 33060	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Nadezda Martinez	
STREET ADDRESS	7188 NW 49th Place	
CITY-ST-ZIP	Lauderhill, FL 33319-3438	
TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Amy Rose	
STREET ADDRESS	4505 W. Atlantic Blvd. #1611	
CITY-ST-ZIP	Pompano Beach, FL 33066-1763	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Linda Bird	
STREET ADDRESS	2740 NES7 Court	
CITY-ST-ZIP	Fort Lauderdale, FL 33308-2724	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Amy Shoosmith	
STREET ADDRESS	1005 SW 15th Ave #6	
CITY-ST-ZIP	Fort Lauderdale, FL 33312-7205	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Lorien Hill-Rocall	
STREET ADDRESS	10528 NW 10th Street	
CITY-ST-ZIP	Plantation, FL 33322-6542	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ruth Lynch	
STREET ADDRESS	2060 NW 48th Terr. #207	
CITY-ST-ZIP	Lauderhill, FL 33313-4169	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Treasurer 21 July 2007 (954) 532-0931

Date

Daytime Phone #

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Suite, Apt. #, etc.

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STREET ADDRESS	161 SE 13TH STREET	
CITY-ST-ZIP	POMPANO BEACH, FL 33060	

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TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Inger Garcia	
STREET ADDRESS	3389 Sheridan Street #546	
CITY-ST-ZIP	Hollywood, FL 33021-3606	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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CITY-ST-ZIP		

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Treasurer

21 July 2007

(954) 532-0931

Date

Daytime Phone #

Page 2
of 2

ATTACHMENT

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