FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

N94000005492 (3)

AMERICAN WOMEN'S LAWN BOWLS ASSOCIATION MEMORIAL FOUNDATION, INC.

Principal Place of Business

Mailing Address

FILED Apr 14 1997 8:00am Secretary of State



| 1104 OPAL LAN SUN CITY CEN | | 1104 OPAL LANE SUN CITY CENTER FL 33573- | 6159 | |
|---|---|---|----------------------------------|--|
| | | | | 3. Date Incorporated or Qualified 3a. Date of Last Report 03/20/1996 |
| 2 Principal P | lace of Business Nutmea Place | 28. Mailing Address 26. 601 Nut | Meg Plac | 4. FEI Number Applied For |
| / Sulte, Apt. | #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired |
| City & State 23 Sun City Center FL 28 Sun City Cen | | | enter, 7 | 6. Election Campaign Financing \$5.00 May Be Added to Fees |
| Zip Country Zip | | | o Usa | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No |
| 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name | | | | |
| | | | | |
| WOOD, ANN 601 NUTMEG PLACE | | | 82 Street | Address (P.O. Box Number is Not Acceptable) |
| SUN CITY CENTER FL 33573 | | | 83 | |
| 3011 011 | POEMIENTE SSS70 | | | |
| 1 | MA WILL | | 84 City | FL 65 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 | | | | |
| | Signature, typed by printed rume of registered agent ar | | | o required when reinstating) DATE |
| 12. | OFFICERS AND D | DELETE | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| NAME | PHILLIPS, BEVERLY | perent | 1.2 NAME | Director Der Change Haddition |
| STREET ADDRESS | 7434 RICHLAND MANOR DIRVE | | 1.3 STREET ADDRESS | 305 Mountain Lake Rd |
| CITY-ST-ZIP | PITTSBURGH PA | | 1.4 CITY-S1-ZIP | Mastic Island, N.J. 08087 |
| TITLE | PD | DELETE | 2.1 1 IT LE | |
| NAME | WOOD, ANN | | 2.2 NAME | Lan messel |
| STREET ADDRESS | 601 NUTMEG PLACE | | 2.3 STREET ADDRESS | 16152 Mesto Dr. |
| CITY-ST-ZIP | SUN CITY CENTER FL | | 2. 4 CITY-ST-ZIP | San Diego, CA 92128 |
| TALE | VPD | ₩ DELETE | 3.1 THLE | ☐ Change ☐ Addition |
| NAME | SEXSMITH, NANCY | | 3.2 NAME | |
| STREET ADDRESS | 6170 N.E. 187 PLACE | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | SEATTLE WA 98185 | | 3.4. CITY - \$1 - ZIP | |
| TITLE | VD | ☐ DELETE | 4.1 TOLE | Change Addition |
| NAME | PIMENTAL, PHYLLIS | | 4.2 NAME | |
| STREET ADDRESS | 24724 TOWNSEND AVENUE | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | HAYWARD CA | D DELLIT | 4.4 CHY-ST-ZIP | |
| TITLE | | ☐ DELETE | 5.1 TITLE | ☐ Change ☐ Addition |
| NAME | | | 5.2 NAME | |
| STREET ADDRESS | | | 5 3 STREET ADDRESS | |
| CITY-ST-ZIP TITLE | | DELETE | 5.4 CITY - ST - ZIP 6.1 TITLE | Change Addition |
| NAME I | | נ) טנננונ | 6.2 NAME | Change () Addition |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | |
| | | | | |
| CITY-ST-ZIP | | | 6.4 CITY - ST - ZIP | |

Too release certain that me minimation supplied with this liting does not qualify for the exemption stated in Section 119.07(3)(I), Florida Statutes. Thirther 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.