

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 # N95000004847 (8)

1. Corporation Name

WOMEN'S CLUB OF BANYAN SPRINGS, INC.



Principal Place of Business

Mailing Address

10780 CEDAR POINT BLVD.
BOYNTON BEACH FL 33437

10780 CEDAR POINT BLVD.
BOYNTON BEACH FL 33437

3. Date Incorporated or Qualified

10/09/1995

3a. Date of Last Report

N/A

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

GREENBERG, CHARLOTTE
10780 CEDAR POINT BLVD.
BOYNTON BEACH FL 33437

10. Name and Address of New Registered Agent

81

Name

RIFKIN, BERNICE

82

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

10780 CEDAR POINT BLVD.

83

84

City

BOYNTON BEACH, FL

FL

85

Zip Code

33437

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

Bernice Rifkin

(NOTE: Registered Agent signature required when reinstating)

5/4/96

DATE

12. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	P CHARLOTTE GREENBERG
1.3 STREET ADDRESS	10043 53 WAY SO. (#2401)
1.4 CITY - ST - ZIP	BOYNTON BEACH, FL 33437
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	V ALMA KATZ
2.3 STREET ADDRESS	10054 CEDAR POINT BLVD (#503)
2.4 CITY - ST - ZIP	BOYNTON BEACH, FL 33437
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	T BERNICE RIFKIN
3.3 STREET ADDRESS	10039 53 WAY SO. (#2303)
3.4 CITY - ST - ZIP	BOYNTON BEACH, FL 33437
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	S DEBRA ORBACH
4.3 STREET ADDRESS	10039 53 WAY SO. (#2302)
4.4 CITY - ST - ZIP	BOYNTON BEACH, FL 33437
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	D HARRIET GETZOW
5.3 STREET ADDRESS	10174 MANGROVE DR. (#201)
5.4 CITY - ST - ZIP	BOYNTON BEACH, FL 33437
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	D NORMA GOLDBERG
6.3 STREET ADDRESS	10050 CHERRYWOOD PL.
6.4 CITY - ST - ZIP	BOYNTON BEACH, FL 33437

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:

Bernice Rifkin BERNICE RIFKIN

5/4/96

DATE

407-786-5922

Daytime Phone #

CR2E037 (12/95)