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Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N96000003667 (0)

1. Corporation Name

CAREER WOMEN'S GOLF ASSOCIATION, INC.



Principal Place of Business

Mailing Address

300 CHAMPIONS DRIVE
DAYTONA BEACH FL 32124

300 CHAMPIONS DRIVE
DAYTONA BEACH FL 32124-1090

3. Date Incorporated or Qualified
07/09/1996

3a. Date of Last Report

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

10. Name and Address of New Registered Agent

BENDER, LUCIA
1355 NO ATLANTIC AVENUE
COCOA BEACH FL 32931

81 Name

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

83

84 City

FL

85 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 or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME STULL, EDITH E
STREET ADDRESS 6713 SOUTH FORK
CITY-ST-ZIP TITUSVILLE FL 32780

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VD
NAME POUNDS, KATHLEEN
STREET ADDRESS 357 CASTELWOOD LANE
CITY-ST-ZIP NEW SMYRNA BEACH FL 32168

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE SD
NAME MULDOWNNEY, ELIZABETH A
STREET ADDRESS 3431 OWL'S WOOD WAY
CITY-ST-ZIP TITUSVILLE FL 32780

3.1 TITLE Vice President
3.2 NAME
3.3 STREET ADDRESS 317 Ringwood Circle
3.4 CITY-ST-ZIP Winter Springs, FL 32708

TITLE TD
NAME BRUCE, DEBORAH L
STREET ADDRESS 317 RINGWOOD CIRCLE
CITY-ST-ZIP WINTER SPRINGS FL 32708

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS 607 PINAR DRIVE
4.4 CITY-ST-ZIP Orlando, FL 32825

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE SD
5.2 NAME
5.3 STREET ADDRESS 2010 S. Ridgewood Ave
5.4 CITY-ST-ZIP Edgewater, FL 32132

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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: Deborah L Bruce

3/13/97

407-826-4582

CR2E037 (9/96)