

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2004 8:00 am
Secretary of State

02-12-2004 90005 021 ****61.25

DOCUMENT # N96000004479	
1. Entity Name HIGHS SPRINGS NEW CENTURY WOMAN'S CLUB, INC.	

Principal Place of Business 40 NW 1ST AVE. HIGH SPRINGS FL 32643	Mailing Address JEAN BUFFINGTON 3205 NE KENSINGTON PL HIGH SPRINGS FL 32643
--	---

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address <i>Marion L. Herzeg</i> Suite, Apt. #, etc. <i>16911 N.W. 129 Terrace</i> City & State <i>Alachua, FL</i> Zip <i>32615</i> Country <i>Alachua</i>
--	---



MOORE CR2E037 (11/03)

6. Name and Address of Current Registered Agent JEAN C BUFFINGTON 3205 NE KENSINGTON PL. HIGH SPRINGS FL 32643	
--	--

4. FEI Number 59-2401019	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

7. Name and Address of New Registered Agent Name <i>MARION L. HERZEG</i> Street Address (P.O. Box Number is Not Acceptable) <i>16911 N.W. 129 Terrace</i> City <i>Alachua</i> FL Zip Code <i>32615</i>	
--	--

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 *MARION L. HERZEG, Treasurer Marion L. Herzeg* 2-5-04
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 Due By May 1, 2004	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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PAYNE, BARBARA 24202 NW 142ND STREET HIGH SPRINGS FL 32643 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Judy Hagg 363 Santa Fe Drive Fort White, FL 32038 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DOLAN, MARION 18404 NW 272 TR HIGH SPRINGS FL 32643 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Ruth Illingworth 534 California Terrace Fort White, FL 32038 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD UNDERWOOD, CHERRY P.O. BOX 357426 TURKEY CREEK FOREST GAINESVILLE FL 32605 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Suzie Clark 340 N.W. 1st Avenue High Springs, FL 32655 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD STEIN, JANET 1730 SE CEDAR STREET HIGH SPRINGS FL 32643 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Marion Dolan 18404 NW 272 Terrace High Springs, FL 32655 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WILDER, SUE RT 2 BOX 8393 FORT WHITE FL 32038 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Barbara Ross 9079 S.E. 2nd St. Rd. Trenton, FL 32693 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BUFFINGTON, JEAN 3205 NE KENSINGTON PL. HIGH SPRINGS FL 32643 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Marion L. Herzeg 16911 N.W. 129 Terrace Alachua, FL 32615 ☒ Change ☐ Addition

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: *Marion L. Herzeg, Treasurer* *Marion L. Herzeg* Feb. 5, 2004 386-462-4298
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #