

2002 UNIFORM BUSINESS REPORT (UBR)

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FILED
Apr 21, 2002 8:00 am
Secretary of State

03-13-2002 90128 022 ****61.25

DOCUMENT # N97000000494

1. Entity Name

TOTAL WOMEN OF AMERICA, INC.

Principal Place of Business

Mailing Address

POST OFFICE BOX 120893
CLERMONT FL 34712-0893

POST OFFICE BOX 120893
CLERMONT FL 34712-0893

2. Principal Place of Business

3. Mailing Address

901 Jan Mar Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

A

City & State
Clermont,

City & State
Florida

4. FEI Number
59-3077800

Applied For
Not Applicable

Zip
34711

Country
USA

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JORDAN, EDWARD P II
13543 EAST HIGHWAY 50
CLERMONT FL 34711

Vice President

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.

SIGNATURE

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WILBURN, RUBY J
111 E SUMTER ST
CLERMONT FL 34711 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
Dr. Paul C. Sorchy II
305 East Hwy 50
Clermont, Fl. 34711 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
JORDAN, EDWARD P II
13543 EAST HIGHWAY 50
CLERMONT FL 34711 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
Darrrell Smith
1118 Arbor Hills Ct.
Clermont Fl. 34711 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LOWE, TINA J
8892 NE 90TH ST
FRUITLAND PARK FL 34731 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
Glenn Winn
906 Jan Mar Ct. Suite A
Clermont, Fl. 34711 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
JORDAN, DEBRA
10129 JACARANDA AVE
CLERMONT FL 34711 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
Candace Rorie
PO Box 12-1462
Clermont, Fl. 34712 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
Ty Kirkpatrick
13206 Casper Lane
Clermont, Fl. 34711 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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: *Dr. Paul C. Sorchy II, Director* 02/27/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)