FILED

1114/02 561.736-9693

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9800005573 1. Entity Name						Jan 31, 2002 8:00 am Secretary of State					
PALM ISLES WOMEN'S CLUB, INC.								90127 039 ****			
Principal Pla	ce of Business	Mailing Address									
- 9779 HARBOUR LAKE CIR 9779 HARBOUR LAI								unu i 500.	,		
	ACH FL 33437-3813	BOYNTON BEACH FL 3343	17-3813					Ancing	[4		
9 Principal	Place of Business	3. Mailing Address									
7746	unter	- Pl.					1 0800				
Suite, Apt	. #, ětc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & Sta ろりんで	. — — — — — — — — — — — — — — — — — — —	BOYNTON BEACH, F1.				4. FEI Number Applied For Not Applicable					
3343	Country	33437 Country A				5. Certificate of S		□ \$8.75 /	Additional	1	
<u> </u>	6. Name and Address of Current F		<u> </u>	> π		7. Name and Add	fress of New Re	Fee Requ	ireo	\dashv	
	المستعبر والمنتج ويولين أولياما	S HALPERN									
SALZBERG, SANDRA Street Address (F						P.O. Box Number is	Not Acceptable)	Place		1	
9779 HARBOUR LAKE CIR BOYNTON BEACH FL 33437-3813						- 11.19a	Julei	1,110		1	
oo Guron	N DEMON FL 33437-3013		ļ	City	ITAN	1 BEACH		FL Zip C	9437	1	
8. The above	e named entity submits this statement for	the purpose of changing its					the state of Flor		<u> </u>	1	
2	11.00		_		1						
SIGNAŢUŖE	www Halp	ern	PX	بلمع	Lon	<u> ナ</u>		<u>/14/02</u>			
للبوية	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTI	E: Registered	l Agent signatu	re required	when reinstating)		DATE			
	FILE NOW: FEE IS \$61.25	9. Election Car	npaign Fi	inancing		\$5.00 May Be	Mak	e Check Payabl	le to		
	FILE NOW: FEE IS \$01.25	Trust Fund (Contributio	on. l		Added to Fees		epartment of Sta			
10.	I OFFICERS AND DIRI	ECTORS	11.		Α	DDITIONS/CHANG	I ES TO OFFICER	S AND DIRECTORS	IN 10	Ⅎ.	
TITLE	VD	☐ Delete	TITLE					Chang	e 🗌 Addition	5	
NAME STREET ADDRESS	ANISMAN, HELEN 7096 -A SUMMER TREE DR		NAME STREE	T ADDRESS						120	
CITY-ST-ZIP	BOYNTON BEACH FL 33437			ST-ZIP						٥	
TITLE	PD	Delete	TITLE		A۳e	SIDENT	PD	Change	Addition	78	
NAME STREET ADDRESS	SALZBERG, SANDRA 9779 HARBOUR LAKE CIRCLE		NAME STREE	T ADDRESS	Tri	s HALI Spring	PERN	01000			
CITY-ST-ZIP	3119 TIANBOON DAKE CINCLE			ST-ZIP	7140	b Springe	OAICE	33434		-	
TITLE	TD	· Delete	- TITLE		3071		~~ <u>~</u> ~ ~~ .	Change	e 🔲 Addition	1	
NAME STREET ADDRESS	SABIN, ESTELLE		NAME	T ADDRESS							
CITY-ST-ZIP	9533 ISLAND BREEZE TER BOYNTON BEACH FL 33437			ST-ZIP						İ	
TITLE	VD	☐ Delete	TITLE					☐ Change	Addition	1	
NAME	MEADOW, MARILYN		NAME								
STREET ADDRESS CITY-ST-ZIP	19939 SEACREST CIRCLE APT 202			T ADDRESS ST-ZIP			1				
TITLE	BOYNTON BEACH FL 33437 SD	□ Delete	TITLE		·.			Change	Addition	1	
NAME	FURMAN, BLANCHE		NAME	İ	. :	r .					
STREET ADDRESS	7264 -A SUMMER TREE DR			T ADDRESS						}	
TITLE	BOYNTON BEACH FL 33437	Delete	TITLE	ST-ZIP				[] Change	e	┥	
NAME	GOLDBARB, CAROLE	i Delete	NAME						, Li Addition		
STREET ADDRESS	7899 SAILING SHORES TERR		STREE	T ADDRESS							
CITY-ST-ZIP	BOYNTON BEACH FL 33437			ST-ZIP							
indicated	certify that the information supplied with t on this report or supplemental report is t	rue and accurate and that n	nv signatu	ire shall ha	ive the sa	eme legal effect as i	if made under oa	ith: that I am an offic	er 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.											
SIGNAT	TIBE. EKWOTI	TO DECIDIO		7		11	14/02	561.73	6-9693		
SIGNAL	UNL.						110-	JUI 12	<u>~ ,~,</u> 少	1	