


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90177 038 ****61.25

DOCUMENT # N98000005573 1. Entity Name PALM ISLES WOMEN'S CLUB, INC.			
Principal Place of Business 7746 SPRINGWATER PLACE BOYNTON BEACH, FL 33437		Mailing Address 7746 SPRINGWATER PLACE BOYNTON BEACH, FL 33437	
2. Principal Place of Business 9545 Palm Isles Drive		3. Mailing Address 7096 Summer Tree Drive	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Boynton Beach, Fl		City & State Boynton Beach Fl	
Zip 33437		Zip 33437	
Country Palm Beach		Country Palm Beach	
6. Name and Address of Current Registered Agent HALPREN, IRIS 7746 SPRINGWATER PLACE BOYNTON BEACH, FL 33437-3813		7. Name and Address of New Registered Agent Name Helen Anisman Street Address (P.O. Box Number is Not Acceptable) 7096 Summer Tree Drive City Boynton Beach FL Zip Code 33437	
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 <u><i>Helen Anisman</i></u> Helen Anisman April 18, 2006 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>		Filing Fee is \$61.25 Due by May 1, 2006	
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	V ANISMAN, HELEN 7096 SUMMER TREE DR. BOYNTON BEACH, FL 33437	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
PD HALPERN, IRIS 7746 SPRINGWATER PLACE BOYNTON BEACH, FL 33437	<input checked="" type="checkbox"/> Delete	P President Helen Anisman 7096 Summer Tree Drive Boynton Beach, FL 33437	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
T SABIN, ESTELLE 9533 ISLAND BREEZE TER BOYNTON BEACH, FL 33437	<input checked="" type="checkbox"/> Delete	V Exec. Vice Pres. Carole Goldfarb 7899 Sailing Shores Ter. Boynton Beach, FL 33437	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
S COLEMAN, AUDREY 7825 WHISPERING PALMS DR. BOYNTON BEACH, FL 33437	<input checked="" type="checkbox"/> Delete	T Treasurer Muriel Levine 9975 Seacrest Circle Apt.102 Boynton Beach, FL 33437	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
V Vice Pres. Elaine Schwartz 9553 Shadybrook Drive #102 Boynton Beach, Florida 33437	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	S Secretary Lydia Delgado 7685 Springwater Pl. #202 Boynton Beach, FL 33437	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
V Vice Pres. Ruth Lurie 7032 Summer Tree Drive Boynton Beach Beach, FL 33437	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	V Vice Pres. Ruth Lurie 7032 Summer Tree Drive Boynton Beach Beach, FL 33437	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u><i>Helen Anisman</i></u> Helen Anisman 4/18/06 561-735-3368 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			