

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2000 8:00 am
Secretary of State

05-11-2000 90293 005 ****61.25

DOCUMENT # N98000005678

1. Entity Name

WOMEN'S CLUB OF HUNTER'S GREEN, INC.

Principal Place of Business

17554 FAIRMEADOW DRIVE
 TAMPA FL 33647

Mailing Address

17554 FAIRMEADOW DRIVE
 TAMPA FL 33647-2500

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3533257

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

AARON, SHIRLEY R
 17554 FAIRMEADOW DRIVE
 TAMPA FL 33647

7. Name and Address of New Registered Agent

Name **Kathy Sollie**
 Street Address (P.O. Box Number is Not Acceptable) **9115 Canberley Drive**
 City **Tampa** FL Zip Code **33647**

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.

KATHY SOLLIE, President

SIGNATURE

Kathy Sollie, President

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/28/00
 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

- TITLE **PD** Delete
- NAME **AARON, SHIRLEY R**
- STREET ADDRESS **17554 FAIRMEADOW DRIVE**
- CITY-ST-ZIP **TAMPA FL 33647**
- TITLE **SD** Delete
- NAME **BARTON, PAMELA**
- STREET ADDRESS **17654 NATHANS DRIVE**
- CITY-ST-ZIP **TAMPA FL 33647**
- TITLE **TD** Delete
- NAME **CONNELLY, CHARLOTTE**
- STREET ADDRESS **17909 HOLLY BROOK DRIVE**
- CITY-ST-ZIP **TAMPA FL 33647**
- TITLE **VD** Delete
- NAME **ARMSTRONG, ELAINE**
- STREET ADDRESS **9113 WOODRIDGE RUN DRIVE**
- CITY-ST-ZIP **TAMPA FL 33647**
- TITLE **VD** Delete
- NAME **CRAWFORD, ALMA**
- STREET ADDRESS **9109 WOODRIDGE RUN DRIVE**
- CITY-ST-ZIP **TAMPA FL 33647**
- TITLE **VD** Delete
- NAME **PAVLIK, PATTI**
- STREET ADDRESS **9220 PINE ISLAND COURT**
- CITY-ST-ZIP **TAMPA FL 33647**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

- TITLE **PRESIDENT** Change Addition
- NAME **Kathy Sollie**
- STREET ADDRESS **9115 Canberley Dr.**
- CITY-ST-ZIP **Tampa, FL. 33647**
- TITLE **SECRETARY** Change Addition
- NAME **Becky Pitts**
- STREET ADDRESS **8920 Magnolia Chase Cr.**
- CITY-ST-ZIP **Tampa, FL. 33647**
- TITLE **TREASURER** Change Addition
- NAME **Judi Moss**
- STREET ADDRESS **9338 Hampshire Park Dr.**
- CITY-ST-ZIP **Tampa, FL. 33647**
- TITLE **MEMBERSHIP VICE PRES.** Change Addition
- NAME **Cindy Benton**
- STREET ADDRESS **18110 Longwater Run Dr.**
- CITY-ST-ZIP **Tampa, FL. 33647**
- TITLE **NEW RESIDENT VICE PRES.** Change Addition
- NAME **Marsha Reid**
- STREET ADDRESS **9039 Quail Creek Dr.**
- CITY-ST-ZIP **Tampa, FL. 33647**
- TITLE **ACTIVITIES VICE PRES.** Change Addition
- NAME **JoAnn Ferro**
- STREET ADDRESS **9418 Hunters Pond Dr.**
- CITY-ST-ZIP **Tampa, FL. 33647**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 empowerment.

SIGNATURE: *Kathy Sollie, President* **4/28/00** **813/913-4355**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CFR2E037 (9/99)