

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002282

FILED
Feb 18, 2007
Secretary of State

Entity Name: THE TAMPA PALMS WOMEN'S CLUB, INC.

Current Principal Place of Business:

16101 COMPTON CIRCLE
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

16101 COMPTON CIRCLE
TAMPA, FL 33647

New Mailing Address:

FEI Number: 59-3579982

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLIVAN, RACHAEL A
15920 DAWSON RIDGE DRIVE
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

GLISSON, AMBER J
5121 STERLING MANOR DR
TAMPA, FL 33647 US

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: AMBER GLISSON

02/18/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FIELD, MARY
Address: 15911 DAWSON RIDGE DRIVE
City-St-Zip: TAMPA, FL 33647

Title: VD () Delete
Name: ANITA, HAMPSON
Address: 15901 BADEN PLACE NORTH
City-St-Zip: TAMPA, FL 33647

Title: TD () Delete
Name: RACHAEL, SULLIVAN A
Address: 15920 DAWSON RIDGE DRIVE
City-St-Zip: TAMPA, FL 33647

Title: SD () Delete
Name: KAY, CONAWAY
Address: 17201 EMERALD CHASE DRIVE
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BROOKOVER, MARION
Address: 7202 YARDLEY WAY
City-St-Zip: TAMPA, FL 33647

Title: VD (X) Change () Addition
Name: MARY, FIELD
Address: 15911 DAWSON RIDGE DRIVE
City-St-Zip: TAMPA, FL 33647

Title: TD (X) Change () Addition
Name: AMBER, GLISSON J
Address: 5121 STERLING MANOR DR
City-St-Zip: TAMPA, FL 33647

Title: SD (X) Change () Addition
Name: VAN FLEET, IMELDA
Address: 7121 WAREHAM DRIVE
City-St-Zip: TAMPA, FL 33647

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AMBER GLISSON

TD

02/18/2007

Electronic Signature of Signing Officer or Director

Date