

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 08 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # P95000055932 (4)

1. Corporation Name

WOMEN'S POLITICAL CAUCUS POLITICAL ACTION COMMITTEE INC.

Principal Place of Business

4220 SW 9 STREET  
PLANTATION FL 33317

Mailing Address

4220 SW 9 STREET  
PLANTATION FL 33317-4547

3. Date Incorporated or Qualified  
07/19/1995

3a. Date of Last Report  
07/02/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

65-0676712

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

BLOODWORTH, JAMIE  
4220 SW 9 STREET  
PLANTATION FL 33317

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Jamie Bloodworth

4/8/97

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

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD  
STREET ADDRESS COLEMAN, SUZANNE S  
CITY-ST-ZIP 2812 ACACIA CT  
FT LAUDERDALE FL 33301

TITLE ☐ DELETE

NAME TD  
STREET ADDRESS BLOODWORTH, JAMIE  
CITY-ST-ZIP 4220 SW 9 STREET  
PLANTATION FL 33317

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Vice Chair - Director ☒ Change ☐ Addition

1.2 NAME Suzanne S. Coleman

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE President - Director ☒ Change ☐ Addition

2.2 NAME Jamie Bloodworth

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Treasurer - Director ☐ Change ☒ Addition

3.2 NAME Beverly Cathern  
3.3 STREET ADDRESS 4220 SW 9 St  
3.4 CITY-ST-ZIP Plantation FL 33317

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jamie Bloodworth

4/18/97 954-603-7651

CR2E034 (9/96)