

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06078

**Entity Name:** THE SOUTH PALM BEACH COUNTY WOMEN'S EXECUTIVE CLUB, INC.

**FILED**  
**May 01, 2019**  
**Secretary of State**  
**3602155205CC**

**Current Principal Place of Business:**

21346 SAINT ANDREWS BLVD.  
#138  
BOCA RATON, FL 33433

**Current Mailing Address:**

PO BOX 811242  
BOCA RATON, FL 33481 US

**FEI Number: 59-2583735**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CSUTOROS, DANA LEE  
21346 ST ANDREWS BLVD #138  
BOCA RATON, FL 33433 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name CSUTOROS, DANA LEE  
Address 21346 SAINT ANDREWS BLVD.  
#138  
City-State-Zip: BOCA RATON FL 33433

Title PPD  
Name ROSEBOOM, PAT  
Address 4400 N. FEDERAL HIGHWAY  
SUITE 100  
City-State-Zip: BOCA RATON FL 33431

Title PPD  
Name WILSON, MARILYN  
Address 2300 GLADES RD  
#140  
City-State-Zip: BOCA RATON FL 33431

Title TREASURER  
Name OWENS, MARY CATHERINE  
Address 5203 MAJORCA CLUB DR.  
City-State-Zip: BOCA RATON FL 33486

*I hereby 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 all other like empowered.*

**SIGNATURE: MARY C. OWENS**

**TREASURER**

**05/01/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date