

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06078

Entity Name: THE SOUTH PALM BEACH COUNTY WOMEN'S EXECUTIVE CLUB, INC.**FILED**
Feb 02, 2021
Secretary of State
7914199372CC**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****02/02/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date