

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000007359

FILED
Apr 30, 2009
Secretary of State

Entity Name: WOMEN'S COUNCIL OF REALTORS FORT MYERS CHAPTER, INC.

Current Principal Place of Business:

15750 NEW HAMPSHIRE CT., SUITE A
FORT MYERS, FL 33908

New Principal Place of Business:

6900-29 DANIELS PARKWAY
FORT MYERS, FL 33912

Current Mailing Address:

P.O. BOX 62342
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 26-0311034 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GUSTAFSON, CONNIE
14529 EAGLE RIDGE DRIVE
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

LEITH, IRIS
703 SABUR COURT
CAPE CORAL, FL 33904 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: IRIS LEITH

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GUSTAFSON, CONNIE
Address: 15750 NEW HAMPSHIRE CT., SUITE A
City-St-Zip: FORT MYERS, FL 33908

Title: PE () Delete
Name: GUIDO, DONNA
Address: 15750 NEW HAMPSHIRE CT., SUITE A
City-St-Zip: FORT MYERS, FL 33908

Title: V () Delete
Name: KRUESI, CINDY
Address: 15750 NEW HAMPSHIRE CT., SUITE A
City-St-Zip: FORT MYERS, FL 33908

Title: S () Delete
Name: BENNETT, MARGE
Address: 15750 NEW HAMPSHIRE CT., SUITE A
City-St-Zip: FORT MYERS, FL 33908

Title: T () Delete
Name: JUREK, BILL
Address: 15750 NEW HAMPSHIRE CT., SUITE A
City-St-Zip: FORT MYERS, FL 33908

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CHANDO, JOANNE
Address: 6900-29 DANIELS PARKWAY, #188
City-St-Zip: FORT MYERS, FL 33912

Title: PE (X) Change () Addition
Name: BENNETT, MARGE
Address: 7431 COLLEGE PARKWAY
City-St-Zip: FORT MYERS, FL 33907

Title: V (X) Change () Addition
Name: POSITION VACANT, NONE
Address: NONE
City-St-Zip: NONE, FL NONE

Title: S (X) Change () Addition
Name: RODENFELS, KATIE
Address: 9001 DANIELS PARKWAY
City-St-Zip: FORT MYERS, FL 33912

Title: T (X) Change () Addition
Name: LEITH, IRIS
Address: 703 SABUR COURT
City-St-Zip: CAPE CORAL, FL 33904

Title: NONE () Change (X) Addition
Name: NONE, NONE NONE
Address: NONE
City-St-Zip: NONE, FL NONE

I hereby certify that the information supplied with this filing does not qualify 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: IRIS LEITH

T

04/30/2009

Electronic Signature of Signing Officer or Director

Date