2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400006324

FILED Mar 03, 2005 Secretary of State

Entity Name: WOMEN'S COUNCIL OF REALTORS DADE SOUTH CHAPTER, INC.

Current Principal Place of Business: New Principal Place of Business:

PO BOX 566172

MIAMI, FL 332566172 US

Current Mailing Address: New Mailing Address:

PO BOX 566172

MIAMI, FL 332566172 US

FEI Number: 65-0454093 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GLOCKMANN, J. FABIA 10850 SW 113 PLACE #216

4244 WESŤ 16 AVE MIAMI, FL 33176 US HIALEAH, FL 33012

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

ESPINOSA, ELIZABETH

in the State of Florida.

SIGNATURE: ELIZABETH ESPINOSA 03/03/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

ORDOVEZ, ANA L ESPINOSA, ELIZABETH Name: Name: 15321 SOUTH DIXIE HWY STE 308 Address: 4244 WEST 16 AVE Address:

City-St-Zip: MIAMI, FL 33176 City-St-Zip: HIALEAH, FL 33012 US

Title: PED () Delete Title: PED (X) Change () Addition ESPINOSA, ELIZABETH Name: DIAZ, NORKA M Name: Address: 4244 WEST 16 AVE Address: 134 EAST 49 STREET City-St-Zip: HIALEAH, FL 33012 City-St-Zip: HIALEAH, FL 33013 US

Title: () Delete Title: VPD (X) Change () Addition GLOCKMANN, J. FABIA SUAREZ, OLGA C Name: Name:

10850 SW 113 PL #216 Address: Address: 7333 CORAL WAY City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33155 US

Title: () Delete Title: **TRED** () Change (X) Addition

Name: Name: RUBIN, DOROTHEE 999 BRICKELL AVE, SUITE 700

Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33131 US

Title: () Delete Title: SECD () Change (X) Addition

MUCI, NORA Name: Name: 999 BRICKELL AVE Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33131 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ELIZABETH ESPINOSA PD 03/03/2005