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Secretary of State

04-30-1999 90115 007 ***150.00

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000091398

1. Corporation Name

**GREATER PENSACOLA BAY AREA CHAPTER OF THE WOMEN'S
COUNCIL OF REALTORS, INC.**

Principal Place of Business

**1000 N. NEW WARRINGTON RD.
PENSACOLA FL 32506-4253**

Mailing Address

**1000 N. NEW WARRINGTON RD.
PENSACOLA FL 32506-4253**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/21/1997

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WHIBBS, VINCENT J JR.
421 N. PALAFOX ST.
PENSACOLA FL 32501**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P ☒ DELETE	1.1 TITLE	P ☒ Change ☐ Addition
NAME	PETTY, LINDA	1.2 NAME	PRILLER, MARCIA
STREET ADDRESS	1000 N. NEW WARRINGTON RD.	1.3 STREET ADDRESS	902 E. BLOUNT STREET
CITY-ST-ZIP	PENSACOLA FL 32506-4253	1.4 CITY-ST-ZIP	PENSACOLA, FL 32501
TITLE	P ☒ DELETE	2.1 TITLE	P ☒ Change ☐ Addition
NAME	PRILLER, MARCIA	2.2 NAME	HEATH, CHARLOTTE
STREET ADDRESS	24 HILLBROOK WAY	2.3 STREET ADDRESS	2107 AIRPORT BLVD.
CITY-ST-ZIP	PENSACOLA FL 32503	2.4 CITY-ST-ZIP	PENSACOLA, FL 32504
TITLE	T ☒ DELETE	3.1 TITLE	T ☒ Change ☐ Addition
NAME	LEBLANC, EVA	3.2 NAME	KIZZEE, LESLEY
STREET ADDRESS	4400 BAYOU BLVD. STE. 29-A	3.3 STREET ADDRESS	7201 N. 9TH AVE., #A-4
CITY-ST-ZIP	PENSACOLA FL 32503	3.4 CITY-ST-ZIP	PENSACOLA, FL 32504
TITLE	S ☒ DELETE	4.1 TITLE	S ☒ Change ☐ Addition
NAME	BROWN, K	4.2 NAME	JENSEN, PAM
STREET ADDRESS	4400 BAYOU BLVD. STE. 29-A	4.3 STREET ADDRESS	9011 N. DAVIS HWY.
CITY-ST-ZIP	PENSACOLA FL 32503	4.4 CITY-ST-ZIP	PENSACOLA, FL 32514
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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, with all other like empowered.

SIGNATURE: LESLEY KIZZEE/TREASURER

4/26/99 (850) 473-0044

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)