2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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Secretary of State
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Entity Name: WOMEN'S COUNCIL OF REALTORS JACKSONVILLE CHAPTER, INC.

Current Principal Place of Business:

4540 ANTLER HILL DR W
JACKSONVILLE, FL 32224

Current Mailing Address:

P O BOX 54700
JACKSONVILLE, FL 32245-4700 US

FEI Number: 36-4364588

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCREYNOLDS, WANDA
4540 ANTLER HILL DR W
JACKSONVILLE, FL 32224 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: WANDA MCREYNOLDS 03/02/2018

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT
Name	MCREYNOLDS, WANDA
Address	4540 ANTLER HILL DR W
City-State-Zip:	JACKSONVILLE FL 32224

Title	SECRETARY
Name	VINCENT, TIEA
Address	1104 BUCKBEAN BRAND LANE E
City-State-Zip:	SAINT JOHNS FL 32259

Title	MEMBERSHIP DIRECTOR
Name	ANDREWS, LISA
Address	1101 KALMIA COURT
City-State-Zip:	SAINT JOHNS FL 32259

Title	TREASURER
Name	TYER, KAYLA
Address	3289 CREIGHTON LANE
City-State-Zip:	FLEMING ISLAND FL 32003

Title	PRESIDENT ELECT
Name	GIVLER, PAULA
Address	13300 ATLANTIC BOULEVARD UNIT 914
City-State-Zip:	JACKSONVILLE FL 32225

Title	PROGRAM DIRECTOR
Name	OGBURN, JANET
Address	14542 MARSHVIEW DRIVE
City-State-Zip:	JACKSONVILLE BEACH FL 32250

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: WANDA MCREYNOLDS PRESIDENT 03/02/2018

Electronic Signature of Signing Officer/Director Detail — Date