

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000004340

**Entity Name:** PONTE VEDRA WOMEN'S CIVIC ALLIANCE, INC.**Current Principal Place of Business:**6020 BRIDGE WATER CIRCLE  
PONTE VEDRA BEACH, FL 32082**Current Mailing Address:**6020 BRIDGE WATER CIRCLE  
PONTE VEDRA BEACH, FL 32082 US**FEI Number:** 45-2289227**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DUNCAN, KAREN  
6020 BRIDGE WATER CIRCLE  
PONTE VEDRA BEACH, FL 32082 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:** KAREN DUNCAN

02/07/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name           DAVEY, JOAN  
Address        251 DEER HAVEN DRIVE  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title            SECRETARY  
Name           SMITH, ANGIE  
Address        519 RUTILE DRIVE  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title            PROGRAMS CO-CHAIR  
Name           CONNERS, JOANNIE  
Address        221 WATERSEDGE DR  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title            VOLUNTEER SERVICES  
Name           JENKINS, MICKI  
Address        174 SAN JUAN DR  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title            TREASURER  
Name           DUNCAN, KAREN  
Address        6020 BRIDGE WATER CIRCLE  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title            PROGRAMS  
Name           WELLS, LORI  
Address        545 LAKE ROAD  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title            COMMUNITY SUPPORT  
Name           RHODIN, EMILY  
Address        210 PABLO CIRCLE  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title            VOLUNTEER SERVICES CO-CHAIR  
Name           LEAPLEY, JEANNIE  
Address        12289 ARBOR DRIVE  
City-State-Zip: PONTE VEDRA BEACH FL 32082

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*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:** KAREN J DUNCAN**TREASURER**

02/07/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            PARLIAMENTARIAN  
Name           LINDSEY, LUCIA  
Address        520 RUTILE DRIVE  
City-State-Zip: PONTE VEDRA BEACH FL 32082  
  
Title            COMMUNITY SUPPORT, CO-CHAIR  
Name           STOUDT, MARCY  
Address        181 SAN JUAN DR.  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title            MEMBERSHIP  
Name           BRICE, SUSAN  
Address        1201 SALT CREEK POINTE WAY  
City-State-Zip: PONTE VEDRA BEACH FL 32082