

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741205

FILED  
Mar 28, 2006  
Secretary of State

Entity Name: REALTORS ASSOCIATION OF ST. LUCIE, INC.

**Current Principal Place of Business:**

6666 SUS #1  
SUITE 1  
PORT SAINT LUCIE, FL 34952 US

**New Principal Place of Business:**

**Current Mailing Address:**

6666 SUS #1  
SUITE 1  
PORT SAINT LUCIE, FL 34952 US

**New Mailing Address:**

FEI Number: 59-1795822      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SHERRARD, JOHN  
34 EAST FIFTH STREET  
STUART, FL 34994 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: KELLY-BROWN, SHARON  
Address: 3146 SE OVERBROOK DR  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: PED ( ) Delete  
Name: MABUS, GERARD  
Address: 1181 W ORANGE  
City-St-Zip: FORT PIERCE, FL 34945

Title: TD ( ) Delete  
Name: O' CONNER, JOHN  
Address: 584 SW ST JOHN BAY  
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: VSD ( ) Delete  
Name: WETZEL, SHERYL  
Address: 1186 SE CLIFTON LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: CEO ( ) Delete  
Name: STORMS, STACIE ANN  
Address: 1749 SE MARIANA RD  
City-St-Zip: PORT SAINT LUCIE, FL 34952

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VSD (X) Change ( ) Addition  
Name: WINGFIELD, THOMAS  
Address: 1555 ST. LUCIE WEST BLVD.  
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: PD (X) Change ( ) Addition  
Name: MABUS, GERARD  
Address: 1181 W ORANGE  
City-St-Zip: FORT PIERCE, FL 34945

Title: TD (X) Change ( ) Addition  
Name: HEDGE, JAMES  
Address: 9700 RESERVE BLVD.  
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: PED (X) Change ( ) Addition  
Name: WETZEL, SHERYL  
Address: 1186 SE CLIFTON LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: CEO (X) Change ( ) Addition  
Name: STORMS, STACI ANN  
Address: 1749 SE MARIANA RD  
City-St-Zip: PORT SAINT LUCIE, FL 34952

I hereby certify that the information supplied with this filing does not qualify for the 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: STACY STORMS

CEO

03/28/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date