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2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 09, 2004 8:00 am
Secretary of State
02-09-2004 90022 004 ****61.25

MOORE CR2E037 (11/03)

DOCUMENT # 743614

1. Entity Name
INSURANCE WOMEN OF JACKSONVILLE, FLORIDA, INCORPORATED

Principal Place of Business	Mailing Address
P.O. BOX 19776 JACKSONVILLE FL 32245-9776	P.O. BOX 19776 JACKSONVILLE FL 32245-9776

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-6211656 — Applied For / Not Applicabl

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WATKINS, ROSLYN
6512 LOU DRIVES
JACKSONVILLE FL 32216

7. Name and Address of New Registered Agent

Name: Katherine E. Harley
Street Address (P.O. Box Number is Not Acceptable): 2441 Lake Lucina Drive North
City: Jacksonville FL Zip Code: 32211-3995

8. 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. I am familiar with, and accep the obligations of registered agent.

SIGNATURE Katherine Harley (Treasurer, Director) 2-1-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25 Due By May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
VPD	WALDO, PENNY	5325 RIDGECREST AVE	JACKSONVILLE FL 32207	☑ Delete
PED	TADROS, EVELYN	13998 CAPTAIN HOOK DRIVE N.	JACKSONVILLE FL 32224	☑ Delete
PD	SMITH, JOCELYN	12227 ROCHFORD LANE	JACKSONVILLE FL 32225	☑ Delete
CS	HAYSLIP, DONNA	273 N MILL VIEW WAY	PONTE VEDRA BEACH FL 32082	☑ Delete
RS	HANNON, MARY	1101 OAKVALE RD	JACKSONVILLE FL 32259	☑ Delete
T	WATKINS, ROSLYN	6512 LOU DRIVES	JACKSONVILLE FL 32216	☑ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
BD	Jane Farish, CPIW (CPCU)	12333 Valpariso Trail (D)	Jacksonville, FL 32223	☐ Change ☒ Addition
VP/PE D	Nancy Wright Linde, CPIW	11848 Gran Crique Ct. South (D)	Jacksonville, FL 32223	☐ Change ☒ Addition
SD	Kathy Boykin, CPIW	11324 Rustic Pines Circle	Jacksonville, FL 32257 (D)	☐ Change ☒ Addition
TD	Katherine E. Harley, CPIW	2441 Lake Lucina Drive North	Jacksonville, FL 32211 (D)	☐ Change ☒ Addition
D	Penny Waldo, CPIW (AIS)	5325 Ridgecrest Avenue	Jacksonville, FL 32207 (D)	☐ Change ☒ Addition
				☐ Change ☐ Addition

12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Katherine Harley Katherine Harley 2-1-04 (904) 743-5162
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #