2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005339

FILED Apr 27, 2006 Secretary of State

Entity Name: WOMEN'S COUNCIL OF REALTORS, LAKELAND CHAPTER, INC.

Current Principal Place of Business: New Principal Place of Business:

1715 S. FLORIDA AVENUE 218 E PINE STEET LAKELAND, FL 33803 LAKELAND, FL 33801

Current Mailing Address: New Mailing Address:

P. O. BOX 514 LAKELAND, FL 33802

FEI Number: 59-3670671 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FULCO, FRANK J

119 HILLCREST ST

LAKELAND, FL 33815 US

TUBB, JOYCE M

515 TIFFANY TERRACE

LAKELAND, FL 33813 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: JOYCE M TUBB 04/27/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD () Delete Title: TD (X) Change () Addition Name: FULCO, FRANK J Name: TUBB, JOYCE M

Address: 119 HILLCREST ST Address: 515 TIFFANY TERR
City-St-Zip: LAKELAND, FL 33815 City-St-Zip: LAKELAND, FL 33813

Title: PD () Delete Title: PD (X) Change () Addition Name: RINKER, MELYNDA Name: TRASK, JAN

 Address:
 1715 S. FLORIDA AVENUE
 Address:
 218 E PINE STREET

 City-St-Zip:
 LAKELAND, FL 33813
 City-St-Zip:
 LAKELAND, FL 33801

Title: PD () Delete Title: VPD (X) Change () Addition

 Name:
 BRIDGES, BETH
 Name:
 MANNARELLI, SHELIA

 Address:
 5354 HIGHWAY 98 NORTH
 Address:
 218 E PINE STREET

 City-St-Zip:
 LAKELAND, FL 33809
 City-St-Zip:
 LAKELAND, FL 33801

Title: S (X) Delete Title: () Change () Addition

 Name:
 HILL, BELINDA
 Name:

 Address:
 4415 S. FLORIDA AVENUE
 Address:

 City-St-Zip:
 LAKELAND, FL 33813
 City-St-Zip:

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: JOYCE M. TUBB TD 04/27/2006