

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001180

FILED
Mar 09, 2009
Secretary of State

Entity Name: COMMERCIAL REAL ESTATE WOMEN-JACKSONVILLE, INC.

Current Principal Place of Business:

7749 NORMANDY BLVD.
#145-160
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

7749 NORMANDY BLVD.
#145-160
JACKSONVILLE, FL 32221

New Mailing Address:

FEI Number: 01-0597804

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARAH, KAREN A TREAS.
7749 NORMANDY BLVD.
#155
JACKSONVILLE, FL 32221 US

Name and Address of New Registered Agent:

FARAH, KAREN A TREAS.
9188 CAMSHIRE DRIVE
JACKSONVILLE, FL 32244 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 FARAH

03/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LIPKO, BETH
Address: ONE INDEPENDENT DRIVE 24TH FLOOR
City-St-Zip: JACKSONVILLE, FL 32202

Title: PE () Delete
Name: EVANS, SUSAN
Address: 4168 SOUTHPPOINT BLVD. # 101
City-St-Zip: JACKSONVILLE, FL 32216

Title: S () Delete
Name: MORE, DEBBIE
Address: 200 W. FORSYTH ST. STE 510
City-St-Zip: JACKSONVILLE, FL 32202

Title: T () Delete
Name: FARAH, KAREN A
Address: 7749 NORMANDY BLVD.
City-St-Zip: JACKSONVILLE, FL 32221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: EVANS, SUSAN
Address: 3724 MONTCLAIR DRIVE
City-St-Zip: JACKSONVILLE, FL 32217

Title: PE (X) Change () Addition
Name: GROSS-ARNOLD, MELISSA
Address: 245 RIVERSIDE AVE. SUITE 150
City-St-Zip: JACKSONVILLE, FL 32202

Title: S (X) Change () Addition
Name: LANGHAM, LAUREN
Address: 225 WATER STREET SUITE 1800
City-St-Zip: JACKSONVILLE, FL 32202

Title: T (X) Change () Addition
Name: FARAH, KAREN A
Address: 9188 CAMSHIRE DRIVE
City-St-Zip: JACKSONVILLE, FL 32244

I hereby certify that the information supplied with this filing does not qualify 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: KAREN FARAH

TREA

03/09/2009

Electronic Signature of Signing Officer or Director

Date