2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007389

Apr 10, 2012 Secretary of State

Entity Name: THE PALM BEACH COUNTY CHAPTER OF THE FLORIDA ASSOCIATION FOR WOMEN LAWYERS,

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

525 OKEECHOBEE BOULEVARD 250 AUSTRALIAN AVE. SOUTH

1200 1504

WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33401

Current Mailing Address: New Mailing Address:

P.O. 3102

WEST PALM BEACH, FL 33402

FEI Number: 56-2295288 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CORTVRIEND, SARAH FREIRE, LEORA B

525 OKEECHOBEE BOULEVARD 250 AUSTRALIAN AVE. SOUTH 1504

1200

WEST PALM BEACH, FL 33401 US WEST PALM BEACH, FL 33401 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: LEORA FREIRE 04/10/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

CORTVRIEND, SARAH Name:

Address: 525 OKEECHOBEE BLVD., SUITE 1200 City-St-Zip: WEST PALM BEACH, FL 33401

Title:

Name: FREIRE, LEORA B

Address: 250 AUSTRALIAN AVE. SOUTH, SUITE 1504

City-St-Zip: WEST PALM BEACH, FL 33401

Title:

LANE, ALLISON B Name:

601 S. FEDERAL HIGHWAY, SUITE 302 Address:

City-St-Zip: BOCA RATON, FL 33432

Title:

Name: STYPULKOWSKI, MARTA

250 AUSTRALIAN AVE. SOUTH, SUITE 1504 Address:

City-St-Zip: WEST PALM BEACH, FL 33401

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.

VΡ SIGNATURE: LEORA FREIRE 04/10/2012