

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007611

FILED
Jan 09, 2009
Secretary of State

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

Current Principal Place of Business:

2965 E GULF TO LAKE HWY
INVERNESS, FL 34453

New Principal Place of Business:

5485 FIRETHORN POINT
BROOKSVILLE, FL 34609

Current Mailing Address:

2965 E GULF TO LAKE HWY
INVERNESS, FL 34453

New Mailing Address:

5485 FIRETHORN POINT
BROOKSVILLE, FL 34609

FEI Number: 14-1894374

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARLSON, HAZEL A
2965 E GULF TO LAKE HWY
INVERNESS, FL 34453 US

Name and Address of New Registered Agent:

SULLIVAN, EILEEN M
5485 FIRETHORN POINT
BROOKSVILLE, FL 34609 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: SULLIVAN

01/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARLSON, HAZEL A
Address: 2965 E GULF TO LAKE HWY
City-St-Zip: INVERNESS, FL 34453

Title: PE () Delete
Name: SULLIVAN, EILEEN
Address: 5485 FIRETHORN POINT
City-St-Zip: BROOKSVILLE, FL 34609

Title: T () Delete
Name: WADE, SALLY
Address: 358 NE 3RD ST
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: VP () Delete
Name: FUSS, ANITA
Address: 4511 N LECANTO HWY
City-St-Zip: BEVERLY HILLS, FL 34465

Title: S () Delete
Name: PETERSON, BONNIE
Address: 425 N CITRUS AVENUE
City-St-Zip: CRYSTAL RIVER, FL 34429

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SULLIVAN, EILEEN M
Address: 5485 FIRETHORN POINT
City-St-Zip: BROOKSVILLE, FL 34609

Title: PE (X) Change () Addition
Name: FUSS, ANITA
Address: 4511 N. LECANTO HWY.
City-St-Zip: BEVERLY HILLS, FL 34456

Title: T (X) Change () Addition
Name: MCKINNON, BARBARA
Address: 1206 SE HWY 19
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: VP (X) Change () Addition
Name: HAHN, BARBARA
Address: 3454 TWIN DOLPHIN DR.
City-St-Zip: BROOKSVILLE, FL 34609

Title: S (X) Change () Addition
Name: PETERSON, BONNIE
Address: 425 N CITRUS AVENUE
City-St-Zip: CRYSTAL RIVER, FL 34429

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: SULLIVAN

P

01/09/2009

Electronic Signature of Signing Officer or Director

Date