

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2006 8:00 am
Secretary of State

04-06-2006 90022 025 ****61.25

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1. Entity Name
STUART AREA ALUMNAE PANAHELLENIC ASSOC, INC.



Principal Place of Business
**984 S.E. WILLOUGHBY TRACE
STUART, FL 34997**

Mailing Address
**984 S.E. WILLOUGHBY TRACE
STUART, FL 34997**

50009502



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02142006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LAY, JUDY
984 S.E. WILLOUGHBY TRACE
STUART, FL 34997**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME WHITEMAN, LAURA
STREET ADDRESS 5094 SE INKWOOD WAY
CITY-ST-ZIP HOBE SOUND, FL 33455

TITLE PD ☒ Change ☐ Addition
NAME A.J. Chase
STREET ADDRESS 4067 S.E. Barcelona St.
CITY-ST-ZIP Stuart, Fl. 34997

TITLE VD ☒ Delete
NAME DUCOIN, MARY JANE
STREET ADDRESS 2187 NW PINE LAKE DR
CITY-ST-ZIP STUART, FL 34994

TITLE VD ☐ Change ☐ Addition
NAME Laura Whiteman
STREET ADDRESS 5094 S.E. Inkwood Way
CITY-ST-ZIP Hobe Sound, Fl. 33455

TITLE SD ☐ Delete
NAME MACDONALD, JILL
STREET ADDRESS 1503 BUTTONBUSH CIR
CITY-ST-ZIP PALM CITY, FL 34990

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☒ Delete
NAME MCADAMS, DIANE
STREET ADDRESS 1509 S.E. LARK BLVD.
CITY-ST-ZIP STUART, FL 34996

TITLE VD ☐ Change ☐ Addition
NAME Jo Lunsford
STREET ADDRESS 3312 S.E. Cambridge Dr.
CITY-ST-ZIP Stuart, Fl. 34997

TITLE T ☐ Delete
NAME LAY, JUDY
STREET ADDRESS 984 SE WILLOUGHBY TRACE
CITY-ST-ZIP STUART, FL 34997

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Judy Lay

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-4-06 (972) 692-2919

Date

Daytime Phone #