

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000011266

FILED
Apr 17, 2009
Secretary of State

Entity Name: THE WOMEN'S COUNCIL OF REALTORS ST. AUGUSTINE CHAPTER, INC.

Current Principal Place of Business:

2120 US HWY 1 SOUTH
STE 111
ST. AUGUSTINE, FL 32086 US

New Principal Place of Business:

601-C PONCE DE LEON BLVD
ST. AUGUSTINE, FL 32084 US

Current Mailing Address:

2120 US HWY 1 SOUTH
STE 111
ST. AUGUSTINE, FL 32086 US

New Mailing Address:

601-C PONCE DE LEON BLVD
ST. AUGUSTINE, FL 32084 US

FEI Number: 20-1265818 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SPRINGHORN, CHRISTOPHER G
2120 US 1 SOUTH
111
ST. AUGUSTINE, FL 32086 US

Name and Address of New Registered Agent:

SPRINGHORN, CHRISTOPHER G
601-C PONCE DE LEON BLVD
ST. AUGUSTINE, FL 32084 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: CHRISTOPHER SPRINGHORN

04/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KNOWLES, JULIE
Address: 5315 A1A SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: VP () Delete
Name: ODOM, ROBERTA
Address: 521 A1A BEACH BLVD.
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: TREA () Delete
Name: REARDON, JOHN
Address: 670 A1A BEACH BLVD.
City-St-Zip: ST. AUGUSTINE, FL 32080

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VESPUCCI, DIANE
Address: 1031 A1A BEACH BLVD
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: VP (X) Change () Addition
Name: TAYLOR, MARJORIE
Address: PO BOX 3234.
City-St-Zip: ST. AUGUSTINE, FL 32085

Title: TREA (X) Change () Addition
Name: NUNCHUCK, MONICA
Address: PO BOX 3234.
City-St-Zip: ST. AUGUSTINE, FL 32085

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: DIANE VESPUCCI

PRES

04/17/2009

Electronic Signature of Signing Officer or Director

Date