



2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90190 044 ****61.25

DOCUMENT # N06000001897 1. Entity Name WOMEN'S COUNCIL OF REALTORS FLAGLER COUNTY CHAPTER, INC.					
Principal Place of Business 2710 EAST MOODY BLVD. BUNNELL, FL 32110			Mailing Address P.O. BOX 4836 1725 FLAGLER BEACH, FL 32136		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip 		3. Mailing Address Suite, Apt. #, etc. City & State Zip 			
04232007 Chg-NP CR2E037 (12/06)				4. FEI Number FIN 20-5118606	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent BASSETT, CYNTHIA 1012 MOODY BLVD. FLAGLER BEACH, FL 32136			7. Name and Address of New Registered Agent Name SARAH BENSON Street Address (P.O. Box Number is Not Acceptable) 5405 John Anderson Hwy. City Flagler Beach FL Zip Code 32136		
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 <i>Sarah H. Benson</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE 4/23/07 <small>(NOTE: Registered Agent signature required when reinstating)</small>	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 NAME STREET ADDRESS CITY-ST-ZIP	P BASSETT, CYNTHIA 1012 MOODY BLVD. FLAGLER BEACH, FL 32136	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Kathy Kerr 7 Crossway CT. Palm Coast, FL 32137	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KERR, KATHY 7 CROSSWAY CT. PALM COAST, FL 32137	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Catherine Groom 28 Weymouth Lane Palm Coast, FL 32164	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GROOM, CATHERINE 28 WEYMOUTH LN. PALM COAST, FL 32164	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Jolita Barry PO Box 351365 Palm Coast, FL 32135	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC BENSON, SARAH 5405 JOHN ANDERSON HWY. FLAGLER BEACH, FL 32136	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec Karen Radcliff 143 Avalon Ave. Flagler Beach, FL 32136	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA UNGER, PAT P.O. BOX 352859 PALM COAST, FL 32135	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA SARAH BENSON 5405 John Anderson Hwy Flagler Beach, FL 32136	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 *Sarah H. Benson* **TREASURER** **4/23/07 (386) 299-8950**