

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000001897

**FILED**  
**Sep 14, 2011**  
**Secretary of State**

**Entity Name:** WOMEN'S COUNCIL OF REALTORS FLAGLER COUNTY CHAPTER, INC.

**Current Principal Place of Business:**

4101 EAST MOODY BLVD.  
BUNNELL, FL 32110

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 352331  
PALM COAST, FL 321352331

**New Mailing Address:**

**FEI Number:** 20-5118606

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALLEN, ELIZABETH S  
4850 BELLE TERRE PARKWAY  
PALM COAST, FL 32164 US

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

PONSIEK, LINDA A  
4873 PALM COAST PKWY., NW  
4  
PALM COAST, FL 32137 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: LINDA PONSIEK

09/14/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: FARRELL, KAREN  
Address: 511 N. OCEANSHORE BLVD.  
City-St-Zip: FLAGLER BEACH, FL 32136

Title: VP  
Name: NIEMINEN, DIANE  
Address: 210 PALM COAST PKWY., STE. B  
City-St-Zip: PALM COAST, FL 32137

Title: T  
Name: PONSIEK, LINDA  
Address: 4873 PALM COAST PKWY., NW, STE. 4  
City-St-Zip: PALM COAST, FL 32137

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.

SIGNATURE: LINDA PONSIEK

TREA

09/14/2011

Electronic Signature of Signing Officer or Director

Date