2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000009233

FILED Jan 02, 2008 Secretary of State

Entity Name: WOMENS COUNCIL OF REALTORS OF EAST POLK COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

700 AVENUE B., S.W. WINTER HAVEN, FL 33880

Current Mailing Address: New Mailing Address:

700 AVENUE B., S.W. P.O. BOX 1607

WINTER HAVEN, FL 33880 WINTER HAVEN, FL 33882 16

FFI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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: Name and Address of New Registered Agent:

BARTON, MICHAEL JASSO, CHRISTINA 1601 SIXTH STREET, S.E. 98 1ST STREET NORTH

WINTER HAVEN, FL 33880 US US WINTER HAVEN, FL 33881

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: CHRISTINA JASSO 01/02/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PRES () Delete (X) Change () Addition

BARTON, MIKE JASSO, CHRISTINA Name: Name: 1601 SIXTH STREET, S.E. Address: 98 1ST STREET NORTH Address: City-St-Zip: WINTER HAVEN, FL 33880 City-St-Zip: WINTER HAVEN, FL 33881

Title: Title: (X) Change () Addition () Delete

JASSO, CHARISTINA Name: MURPHY, PATTI Name:

Address: 700 AVE. B., S.W. Address: 290 CYPRESS GARDENS BLVD City-St-Zip: WINTER HAVEN,, FL 33880 City-St-Zip: WINTER HAVEN,, FL 33880

Title: **TREA** () Delete Title: **TREA** (X) Change () Addition

BRYAN, IRENE DEVANE, GLENDA Name: Name: 5628 CYPRESS GARDENS BLVD Address: 700 AVE. B., S.W. Address:

City-St-Zip: WINTER HAVEN, FL 33880 City-St-Zip: WINTER HAVEN, FL 33884

Title: Title: SEC () Change (X) Addition () Delete

DAVENPORT, GAIL Name: Name: 149 AVENUE K SE Address: Address: City-St-Zip: City-St-Zip: WINTER HAVEN, FL 33880

Title: () Delete Title: () Change (X) Addition

ADKINS, CHRISTI Name: Name:

290 CYPRESS GARDENS BLVD Address: Address: WINTER HAVEN, FL 33880 City-St-Zip: City-St-Zip:

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: CHRISTINA JASSO **PRES** 01/02/2008