

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000007789

**FILED**  
**Feb 21, 2012**  
**Secretary of State**

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

**Current Principal Place of Business:**

3629 LONG LEAF DRIVE  
MELBOURNE, FL 32940 US

**New Principal Place of Business:**

5500 MURRELL ROAD  
MELBOURNE, FL 32940 US

**Current Mailing Address:**

3629 LONG LEAF DRIVE  
MELBOURNE, FL 32940 US

**New Mailing Address:**

5500 MURRELL ROAD  
MELBOURNE, FL 32940 US

**FEI Number:** 27-3249721

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MAREK, NORA  
3629 LONG LEAF DRIVE  
MELBOURNE, FL 32940 US

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

GAVIRIA, MARY  
5500 MURRELL ROAD  
MELBOURNE, FL 32940 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: MARY GAVIRIA

02/21/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SCOTT, MARGARET  
Address: 5500 MURRELL ROAD  
City-St-Zip: MELBOURNE, FL 32940 US

Title: DG  
Name: JOANNA, HYNES  
Address: 5500 MURRELL ROAD  
City-St-Zip: MELBOURNE, FL 32940 US

Title: T  
Name: GAVIRIA, MARY  
Address: 5500 MURRELL ROAD  
City-St-Zip: MELBOURNE, FL 32940 US

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: MARY GAVIRIA

T

02/21/2012

Electronic Signature of Signing Officer or Director

Date