

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005250

FILED  
Jan 18, 2011  
Secretary of State

**Entity Name:** ST. LUCIE COUNTY CHAPTER OF THE WOMENS COUNCIL OF REALTORS, INC.

**Current Principal Place of Business:**

6666 SOUTH US HWY 1  
STE. 1  
PORT ST. LUCIE, FL 34952

**New Principal Place of Business:**

**Current Mailing Address:**

6666 SOUTH US HWY 1  
STE. 1  
PORT ST. LUCIE, FL 34952

**New Mailing Address:**

**FEI Number:** 65-0816965

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COPENHAVER, SHIRLEY  
C/O REALTOR ASSOC. ST. LUCIE COUNTY  
6666 SOUTH US1 SUITE 100  
PORT ST. LUCIE, FL 34952 US

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

GARNER, ALTHEA C  
C/O REALTOR ASSOC. ST. LUCIE COUNTY  
6666 SOUTH US1 SUITE 100  
PORT ST. LUCIE, FL 34952 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: ALTHEA C. GARNER

01/18/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ALTHEA, GARNER C  
Address: 6666 SOUTH US1 SUITE 100  
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: PE  
Name: HERNANDEZ, CRISTI  
Address: 213 EVERGLADES BLVD  
City-St-Zip: STUART, FL 34994

Title: VPM  
Name: STEGMAIER, PATRICIA  
Address: 816 SW GLENVIEW CT  
City-St-Zip: PORT ST LUCIE, FL 34953

Title: SEC  
Name: ANKROM, STEPHANIE  
Address: 1850 SW FOUNTAINVIEW BLVD STE 102  
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: PP  
Name: LOWE, CURTIS  
Address: 458 SW EYERLY AVENUE  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: PP  
Name: PAPPA, CARMEN  
Address: 407 SW REDWOOD CV  
City-St-Zip: PORT SAINT LUCIE, FL 34986

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: ALTHEA C GARNER

P

01/18/2011

Electronic Signature of Signing Officer or Director

Date