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NONPROFIT
 CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N98000007279

1. Corporation Name

JUPITER-TEQUESTA-HOBE SOUND CHAPTER OF THE WOMEN'S COUNCIL OF REALTORS INC.

Principal Place of Business

810 SATURN STREET #20
 JUPITER FL 33477

Mailing Address

810 SATURN STREET #20
 JUPITER FL 33477



2. Principal Place of Business

21 Same as Above

2a. Mailing Address

26 Same as Above

3. Date Incorporated or Qualified

12/28/1998

4. FEI Number

Applied For
 Not Applicable

22 Suite, Apt. #, etc.

27

23 City & State

28 City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

24 Zip

25 Country

29 Zip

30 Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

STANFIELD, JEANNE
 810 SATURN STREET #20
 JUPITER FL 33477

10. Name and Address of New Registered Agent

81 Name STANFIELD, JEANNE
 82 Street Address (P.O. Box Number is Not Acceptable) 810 Saturn St # 20
 83 Jupiter
 84 City Jupiter FL 85 Zip Code 33477

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE JEANNE STANFIELD

Jeanne Stanfield

3/8/99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input type="checkbox"/> DELETE
NAME	STANFIELD, JEANNE	
STREET ADDRESS	155 JUPITER KEY ROAD	
CITY-ST-ZIP	JUPITER FL 33477	
TITLE	D	<input type="checkbox"/> DELETE
NAME	LACORTE, MIDGE	
STREET ADDRESS	1014 RIVERWOOD LANE	
CITY-ST-ZIP	JUPITER FL 33458	
TITLE	D	<input type="checkbox"/> DELETE
NAME	RANAZZO, JOSEPHINE C	
STREET ADDRESS	6641 W. INDIANTOWN ROAD	
CITY-ST-ZIP	JUPITER FL 33458	
TITLE	D	<input type="checkbox"/> DELETE
NAME	RATHKE, CAROLA	
STREET ADDRESS	POST OFFICE BOX 86	
CITY-ST-ZIP	JUPITER FL 33468	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CLARK, BONNIE	
STREET ADDRESS	POST OFFICE BOX 2867	
CITY-ST-ZIP	JUPITER FL 33468	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	MARTIN, CANDY	
STREET ADDRESS	133 EGRET DRIVE	
CITY-ST-ZIP	JUPITER FL 33458	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEANNE STANFIELD 3/8/99 561-744-4303

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)