

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721781

FILED
Feb 05, 2009
Secretary of State

Entity Name: THE INTERNATIONAL WOMEN'S FISHING ASSOCIATION

Current Principal Place of Business:

21547 TIMBERLAKE ROAD
LYNCHBURG, VA 24502

New Principal Place of Business:

6863 N.C. HIGHWAY 56
FRANKLINTON, NC 27525

Current Mailing Address:

P.O. BOX 21066
FT. LAUDERDALE, FL 33335

New Mailing Address:

FEI Number: 59-6153101 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LEADER, PAUL F
5979 N.W. 151 STREET
SUITE 110
MIAMI LAKES, FL 33014 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HAHN, GEWN
Address: 607 ROSA COURT
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: V () Delete
Name: BOOTH, LISA
Address: 21547 TIMBERLAKE ROAD
City-St-Zip: LYNCHBURG, VA 24502

Title: S () Delete
Name: DELANOVSSAYE, KATHY
Address: 76184 OVERSEAS HIGHWAY
City-St-Zip: ISLAMORADA, FL 33036

Title: T () Delete
Name: LOCKE, DIANE
Address: 7105 NORTH RIDGE DR.
City-St-Zip: RALEIGH, NC 27615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: DIANE LOCKE

TREA

02/05/2009

Electronic Signature of Signing Officer or Director

Date