2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# N06000009620

Entity Name: WOMEN'S FOUNDATION OF PALM BEACH COUNTY, INC.

Current Principal Place of Business:

700 VIA LUGANO CIRCLE
212
BOYNTON BEACH, FL 33436 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 7576
WEST PALM BEACH, FL 33405 US

New Mailing Address:

FEI Number: 61-1508703 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SELZER, JUDITH A
700 VIA LUGANO CIRCLE
212
BOYNTON BEACH, FL 33436 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:	PRES	( ) Delete
Name:	SCHOSBERG FEUER, SAMANTHA	
Address:	PO BOX 7576	
City-St-Zip:	WEST PALM BEACH, FL 33405	
Title:	TRES	( ) Delete
Name:	WEISS, JILL	
Address:	PO BOX 7576	
City-St-Zip:	WEST PALM BEACH, FL 33405	
Title:	SEC	( ) Delete
Name:	SUTTON, STACEY	
Address:	PO BOX 7576	
City-St-Zip:	WEST PALM BEACH, FL 33405	
Title:	CO-P	( ) Delete
Name:	SELZER, JUDITH	
Address:	PO BOX 7576	
City-St-Zip:	WEST PALM BEACH, FL 33405	
Title:	BOAR	( ) Delete
Name:	MURRAY, MARY KAY	
Address:	PO BOX 7576	
City-St-Zip:	WEST PALM BEACH, FL 33405	
Title:	BOAR	( ) Delete
Name:	KING, NELLIE	
Address:	PO BOX 7576	
City-St-Zip:	WEST PALM BEACH, FL 33405	

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:	
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: JUDITH SELZER CO-P 04/28/2009

Electronic Signature of Signing Officer or Director — Date