2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N07000009463

Entity Name: MOTHERS, DAUGHTERS, SISTERS AND FRIENDS, INC.

Current Principal Place of Business:

1131 W. FERNLEA DRIVE
WPB, FL 33417

New Principal Place of Business:

Current Mailing Address:

1131 W. FERNLEA DRIVE
WPB, FL 33417

New Mailing Address:

FEI Number: 26-1160990 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RIVERA, NANCY
1131 W. FERNLEA DRIVE
WPB, FL 33417 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: RIVERA, NANCY
Address: 1131 W. FERNLEA DRIVE
City-St-Zip: WPB, FL 33417

Title: SECY ( ) Delete
Name: TORRES, ANGELINA
Address: 1821 FOREST AVENUE
City-St-Zip: WPB, FL 33405

Title: TREA ( ) Delete
Name: DUMARSAIS, ROSE
Address: 1705 17TH WAY
City-St-Zip: WPB, FL 33407

Title: COOR ( ) Delete
Name: CRESPO, JOBITA
Address: 12176 PASADENA WAY
City-St-Zip: BOYNTON BEACH, FL 33437

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: NANCY RIVERA P 04/29/2009

Electronic Signature of Signing Officer or Director — Date