

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007891

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: WORLD WIDE WOMEN INTERDENOMINATIONAL MINISTRY, INC

**Current Principal Place of Business:**

18235 NW 41ST COURT  
MIAMI GARDENS, FL 33055

**New Principal Place of Business:**

8203 S. PALM DR  
#238  
PEMBROKE PINES, FL 33025

**Current Mailing Address:**

18235 NW 41ST COURT  
MIAMI GARDENS, FL 33055

**New Mailing Address:**

8203 S. PALM DR  
#238  
PEMBROKE PINES, FL 33025

FEI Number: 30-0501009

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OLAWAIYE, MARGARET B REV.  
18235 NW 41ST COURT  
MIAMI GARDENS, FL 33055 US

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

OLAWAIYE, MARGARET B REV.  
8203 S. PALM DR  
PEMBROKE PINES, FL 33025 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: BMOLAWAIYE

04/21/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: OLAWAIYE, MARGARET B REV.  
Address: 18235 NW 41ST COURT  
City-St-Zip: MIAMI GARDENS, FL 33055

Title: V ( ) Delete  
Name: COKER, KATHY MINISTE  
Address: 18235 NW 41ST COURT  
City-St-Zip: MIAMI GARDENS, FL 33055

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: OLAWAIYE, MARGARET B REV.  
Address: 8203 S. PALM DR  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: V (X) Change ( ) Addition  
Name: MILES, SANDY SISTER  
Address: 8203 S. PALM DR.  
City-St-Zip: PEMBROKE PINES, FL 33025

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: BMOLAWAIYE

REV

04/21/2009

Electronic Signature of Signing Officer or Director

Date