

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29435

FILED
Apr 28, 2008
Secretary of State

Entity Name: A WOMAN'S PLACE MINISTRIES, INC.

Current Principal Place of Business:

2901 BUSCH LAKE BLVD
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

2901 BUSCH LAKE BLVD
TAMPA, FL 33614

New Mailing Address:

FEI Number: 59-2957640 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAYTON, PATRICIA
2901 BUSCH LAKE BLVD
TAMPA, FL 33614 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: CD () Delete
Name: THORINGTON, JOHN
Address: 10117 BENNINGTON DR
City-St-Zip: TAMPA, FL 33626

Title: VC () Delete
Name: LAYTON, PATRICIA K
Address: 14520 THORNFIELD COURT
City-St-Zip: TAMPA, FL 33624

Title: T () Delete
Name: TALLEY, JAY
Address: 6312 FITZGERALD RD
City-St-Zip: ODESSA, FL 33556

Title: D () Delete
Name: CARR, MARGILEE
Address: 931 GUISSANDO DE AVILA
City-St-Zip: TAMPA, FL 33613

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: THORINGTON, JOHN
Address: 10117 BENNINGTON DR
City-St-Zip: TAMPA, FL 33626

Title: P (X) Change () Addition
Name: LAYTON, PATRICIA K
Address: 14520 THORNFIELD COURT
City-St-Zip: TAMPA, FL 33624

Title: T (X) Change () Addition
Name: TALLEY, JAY
Address: 6602 FITZGERALD RD
City-St-Zip: ODESSA, FL 33556

Title: D (X) Change () Addition
Name: DULLE, JIM
Address: 18519 COUNCIL CREST DRIVE
City-St-Zip: ODESSA, FL 33556

Title: D () Change (X) Addition
Name: DULLE, SHERY
Address: 18519 COUNCIL CREST DRIVE
City-St-Zip: ODESSA, FL 33556

Title: D () Change (X) Addition
Name: SCARBORO, JEANETTE
Address: 17002 WINNERS CIRCLE
City-St-Zip: ODESSA, FL 33556

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: PATRICIA K. LAYTON

P

04/28/2008

Electronic Signature of Signing Officer or Director

_____ Date