

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51413

FILED
Aug 17, 2006
Secretary of State

Entity Name: WINGS: WOMEN IN NEED OF GROWTH SERVICES, INC.

Current Principal Place of Business:

1303 DELMAR LANE
NAPLES, FL 34106 US

New Principal Place of Business:

Current Mailing Address:

8805 TAMIAMI TRL N
305
NAPLES, FL 34108

New Mailing Address:

FEI Number: 65-0375754 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DUVALL, MARYANN
8805 TAMIAMI TRAIL N, # 305
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

MOONEY, KIERSTEN
8805 TAMIAMI TRAIL N, # 305
NAPLES, FL 34108 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: KIERSTEN MOONEY

08/17/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KJERSTEN, MOONEY
Address: 8477 BAY COLONY DR, # 1002
City-St-Zip: NAPLES, FL 34108

Title: T () Delete
Name: MARTIN, SHERRY
Address: 4945 COOGAR CT S, # 205
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: DUVALL, MARYANN
Address: 1101 EGRETS WALK CIR., #102
City-St-Zip: NAPLES, FL 34108

Title: SD () Delete
Name: OSBORNE, MARGOT
Address: 11770 NIGHT HEREN DR
City-St-Zip: NAPLES, FL 34119

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KIERSTEN, MOONEY
Address: 8477 BAY COLONY DR, # 1002
City-St-Zip: NAPLES, FL 34108

Title: T (X) Change () Addition
Name: SCHATSCHNEIDER, SHERRY
Address: 4940 COUGAR CT S, # 105
City-St-Zip: NAPLES, FL 34109

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

Title: SD (X) Change () Addition
Name: ROSS, EMILY J
Address: 203014 GRANDE OAKS BLVD #118
City-St-Zip: ESTERO, FL 33928

Title: VP () Change (X) Addition
Name: SMITH, JOAN
Address: 472 WOODSHIRE LANE D10
City-St-Zip: NAPLES, FL 34105

I hereby certify that the information supplied with this filing does not qualify for the 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: KIERSTEN MOONEY

P

08/17/2006

Electronic Signature of Signing Officer or Director

Date