

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51413

FILED
Feb 05, 2008
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 ()

Name and Address of Current Registered Agent:

MOONEY, KIERSTEN
8805 TAMIAMI TRAIL N, # 305
NAPLES, FL 34108 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: KIERSTEN, MOONEY
Address: 8477 BAY COLONY DR, # 1002
City-St-Zip: NAPLES, FL 34108

Title: T () Delete
Name: ROSS, EMILY
Address: 9200 AVIANO DRIVE
City-St-Zip: FORT MYERS, FL 33913

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

Title: SD () Delete
Name: AURELIO, ALYSON
Address: % NATIONAL CITY, 4085 TAMIAMIA TRL N, STE
City-St-Zip: NAPLES, FL 34103

Title: SD () Delete
Name: PEMBERTON, CHANTE
Address: 550 5TH AVE SOUYH
City-St-Zip: NAPLES, FL 34102

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: SD (X) Change () Addition
Name: PEMBERTON, CHANTE
Address: 550 5TH AVE SOUTH
City-St-Zip: NAPLES, FL 34102

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: EMILY J ROSS

Electronic Signature of Signing Officer or Director

T

02/05/2008

Date