


**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 10, 2003 8:00 am**  
**Secretary of State**

04-10-2003 90129 001 \*\*\*\*61.25

**DOCUMENT # N51413**

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



Principal Place of Business  
~~4037 GUAVA DR~~ *moved to:*  
**NAPLES FL 34112**  
US

Mailing Address  
**1919 E CROWN POINTE DR**  
**NAPLES FL 34112**

2. Principal Place of Business  
**1303 Delmar Lane**

3. Mailing Address  
Suite, Apt. #, etc.

City & State  
**Naples, Florida**

City & State  
Suite, Apt. #, etc.

City & State  
**Naples, Florida**

City & State  
**Naples, Florida**

4. FEI Number **65-0375754** Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent  
**GASVODA, JEAN**  
**1919 E CROWN POINTE DR**  
**NAPLES FL 34112**

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Jean Gasvoda*  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE <b>D</b>	<input checked="" type="checkbox"/> Delete <b>PAINTER, DALE</b> <b>2654 KINGS LAKE BLVD</b> <b>NAPLES FL 34112</b>	TITLE <b>P-D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>Jean Gasvoda</i> <b>1919 E. Crown Pointe Blvd.</b> <b>Naples, FL 34112</b>
TITLE <b>D</b>	<input type="checkbox"/> Delete <b>GASVODA, JEAN</b> <b>1919 E CROWN POINTE DR</b> <b>NAPLES FL 34112</b>	TITLE <b>S-D</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition <i>Margot Osborne</i> <b>11770 Night Heron Dr</b> <b>Naples, FL 34119</b>
TITLE <b>D</b>	<input checked="" type="checkbox"/> Delete <b>PACKARD, PENNY</b> <b>574 108TH AVEN</b> <b>NAPLES FL 34108</b>	TITLE <b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <i>Maryann Duval</i> <b>1101 Egret's Walk Circle #102</b> <b>Naples, FL 34108</b>
TITLE <b>SD</b>	<input type="checkbox"/> Delete <b>OSBORNE, MARGOT</b> <b>11770 NIGHT HEREN DR</b> <b>NAPLES FL 34119</b>	TITLE <b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <i>Suzanne Herman</i> <b>5881 Golden Gate Hwy.</b> <b>Naples, FL 34116</b>
TITLE	<input type="checkbox"/> Delete	TITLE <b>T-D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <i>Joan Smith</i> <b>4702 Woodshire Lane D-10</b> <b>Naples, FL 34105</b>
TITLE	<input type="checkbox"/> Delete	TITLE <b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <i>Ann Wydman</i> <b>15660 Villorise Way</b> <b>Naples, FL 34110</b>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jean Gasvoda* **JEAN GASVODA** 4-8-03 239-774-9426

CR2E037 (10/02)