

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000844

FILED
Feb 11, 2009
Secretary of State

Entity Name: A WOMEN'S RESOURCE CENTER OF PALATKA FLORIDA INC.

Current Principal Place of Business:

3403 ST. JOHNS AVE.
PALATKA, FL 32177

New Principal Place of Business:

Current Mailing Address:

PO BOX 811
PALATKA, FL 32178

New Mailing Address:

FEI Number: 59-3569298 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAW, LINDA
107 WESTOVER CIRCLE
PALATKA, FL 32177 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: BC () Delete
Name: BECKLER, LAURA
Address: 201 FEDERAL POINT RD.
City-St-Zip: EAST PALATKA, FL 32131

Title: BT () Delete
Name: GALLO, SILVANA
Address: 118 BRIDGEPORT RD.
City-St-Zip: PALATKA, FL 32177

Title: BS () Delete
Name: HARRIS, SHIRLEY
Address: 103 THICKET LANE
City-St-Zip: PALATKA, FL 32177

Title: BM () Delete
Name: MILLS, BOB F
Address: 295 B EAST RIVER RD.
City-St-Zip: EAST PALATKA, FL 32131

Title: BM () Delete
Name: MADDOX, GENE
Address: 515 S. 17TH ST.
City-St-Zip: PALATKA, FL 32177

Title: BVC () Delete
Name: WRIGHT, RENEE
Address: 108 JOHNS PLACE
City-St-Zip: EAST PALATKA, FL 32131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: BT (X) Change () Addition
Name: BENNETT, BOBBIE
Address: 246 STOKES LANDING RD
City-St-Zip: PALATKA, FL 32177

Title: BS (X) Change () Addition
Name: HURST, SANDY
Address: 130 STOKES LANDING RD
City-St-Zip: PALATKA, FL 32177

Title: BVC (X) Change () Addition
Name: HUDSON, ROBIN
Address: PO BOX 103
City-St-Zip: EAST PALATKA, FL 32131

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

Title: BM (X) Change () Addition
Name: TIPPETT, BEN
Address: 125 CYPRESS DR
City-St-Zip: PALATKA, FL 32177

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: LINDA FAW

Electronic Signature of Signing Officer or Director

DIR

02/11/2009

Date