

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004572

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: DAUGHTERS OF NAOMI, INC.

## Current Principal Place of Business:

665 HOWARD ST  
FT PIERCE, FL 34982

## New Principal Place of Business:

## Current Mailing Address:

665 HOWARD ST  
FT PIERCE, FL 34982

## New Mailing Address:

FEI Number: 11-3643449

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GEORGE, SANDRA D  
665 HOWARD ST  
FT PIERCE, FL 34982 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: DC ( ) Delete  
Name: GEORGE, STUART W DVM  
Address: 665 HOWARD ST  
City-St-Zip: FT PIERCE, FL 34982

Title: DP ( ) Delete  
Name: GEORGE, SANDRA D  
Address: 665 HOWARD ST  
City-St-Zip: FT PIERCE, FL 34982

Title: D ( ) Delete  
Name: TOWNSEND-KING, CATHY  
Address: 3601 N A1A  
City-St-Zip: FORT PIERCE, FL 34949

Title: D ( ) Delete  
Name: WORD, TRACY  
Address: 2367 WINDSOR WAY  
City-St-Zip: BARTLESVILLE, OK 74006

Title: DS ( ) Delete  
Name: HANSON, JOLYNN  
Address: 7993 SADDLEBROOK DR  
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: D ( ) Delete  
Name: BRIDGERS, CRAIG  
Address: 1204 SW DEL RIO BLVD  
City-St-Zip: PORT SAINT LUCIE, FL 34986

## 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: D (X) Change ( ) Addition  
Name: MIRET, KAREN  
Address: 7950 POPPY HILLS LANE  
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: D (X) Change ( ) Addition  
Name: RINDERKNECHT, LINDA  
Address: 2225 SE SEAMIST STREET  
City-St-Zip: PORT SAINT LUCIE, FL 34952

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: SANDRA GEORGE

DP

04/27/2007

Electronic Signature of Signing Officer or Director

Date