2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000301

FILED Apr 30, 2008 Secretary of State

Entity Name: RESOURCES FOR WOMEN, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 1801 S. NOVA RD. SUITE 104 S. DAYTONA, FL 32119 **New Mailing Address: Current Mailing Address:** 1801 S. NOVA RD. 1801 S. NOVA RD. SUITE 104 SUITE 104 SOUTH DAYTONA, FL 32119 S. DAYTONA, FL 32119 FEI Number: 75-2996613 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SHUMAKER, JOYCE EX. DIR 1801 S. NOVA RD. SUITE 104 S. DAYTONA, FL 32119 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SHUMAKER, JOYCE Name: Name: 109 ASHBY COVE LANE Address: Address: City-St-Zip: NEW SMYRNA BCH, FL 32168 City-St-Zip: Title: VD () Delete Title: VD (X) Change () Addition HEILAND, MELISSA Name: WEIGAND, FRED DR. Name: Address: 341 GLEN CLUB DRIVE Address: 2670 DOYLE RD City-St-Zip: DEBARY, FL 32713 City-St-Zip: DELTONA, FL 32738 Title: () Delete Title: SD (X) Change () Addition DEWEES, PATRICIA BONILLA, ALLISON Name: Name: 508 BLOSSOOMWOOD DR. 3787 CARRICK AVENUE Address: Address: City-St-Zip: DEBARY, FL 32713 City-St-Zip: ORMOND BEACH, FL 32174 (X) Change () Addition Title: () Delete Title: D Name: WEIGAND, FRED Name: GREEN, GARTH 2670 DOYLE RD. Address: Address: 125 GULL CIRCLE NORTH City-St-Zip: DELTONA, FL 32738 City-St-Zip: SOUTH DAYTONA, FL 32119 Title: (X) Delete Title: () Change () Addition GREEN, GARTH Name: Name: 125 N. GULL CIRCLE Address: Address: City-St-Zip: S. DAYTONA, FL 32119 City-St-Zip: Title: (X) Delete Title: () Change () Addition DEWEES, PATRICIA Name: Name: Address: 3787 CARRICK DR. Address: ORMOND BEACH, FL 32174 City-St-Zip: City-St-Zip:

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: JOYCE SHUMAKER PD 04/30/2008