

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000006132

**Entity Name:** WOMAN TO WOMAN INTERNATIONAL MINISTRY, INC.

**Current Principal Place of Business:**

820 S. PARK AVE  
WINTER GARDEN, FL 34787

**Current Mailing Address:**

820 S. PARK AVE  
WINTER GARDEN, FL 34787

**FEI Number: 59-3709627**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

JAMES, CLORETHA MDR  
122 CUPANIA CT.  
GROVELAND, FL 34736 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

**Officer/Director Detail :**

Title DP  
Name JAMES, CLORETHA MDR  
Address 122 CUPANIA CT  
City-State-Zip: GROVELAND FL 34736

Title T  
Name JAMES, NORMAN JSR  
Address 122 CUPANIA CT  
City-State-Zip: GROVELAND FL 34736

Title T  
Name MITCHELL, WILLIE MAE  
Address 810 SOUTH PARK AVE  
City-State-Zip: WINTER GARDEN FL 34787

Title T  
Name WILLIAMS, ROSETTA  
Address 5401 SW 21 ST.  
City-State-Zip: HOLLYWOOD FL 33023

Title T  
Name SHEMONE, PRESLEY  
Address 1425 DANIELS COVE DR.  
City-State-Zip: WINTER GARDEN FL 34787

*I hereby 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 all other like empowered.*

**SIGNATURE: CLORETHA JAMES**

**PRESIDENT**

**04/24/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date