

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713615

FILED  
Feb 16, 2009  
Secretary of State

**Entity Name:** COUNCIL FOR CONTINUING EDUCATION FOR WOMEN OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

1620 MAYFLOWER COURT  
A-415  
WINTER PARK, FL 32792

**New Principal Place of Business:**

**Current Mailing Address:**

1620 MAYFLOWER COURT  
A-415  
WINTER PARK, FL 32792

**New Mailing Address:**

**FEI Number:** 59-6214617

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ETTINGER, BEATRICE B.  
1620 MAYFLOWER COURT  
APT A415  
WINTER PARK, FL 32792 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: S ( ) Delete  
Name: FUCHS, ROSALIND E  
Address: 956 STONEWOOD LANE  
City-St-Zip: MAITLAND, FL 32751

Title: TD ( ) Delete  
Name: CROTTY, MARILYN,  
Address: 150 SPRING COVE TRAIL  
City-St-Zip: ALTAMONTE SPRINGS, FL

Title: VD ( ) Delete  
Name: MACMAHON, ALICE T,  
Address: 1111 WILLOWBROOK TRAIL  
City-St-Zip: MAITLAND, FL 00000,

Title: PD ( ) Delete  
Name: ETTINGER, BEATRICE B,  
Address: 1620 MAYFLOWER COURT APT 415  
City-St-Zip: WINTER PARK, FL 32792

**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:

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: BEATRICE B. ETTINGER

PD

02/16/2009

Electronic Signature of Signing Officer or Director

Date