

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752807

FILED
Apr 23, 2009
Secretary of State

Entity Name: NATIONAL CONFERENCE OF PUERTO RICAN WOMEN, INC.

Current Principal Place of Business:

1400 SALZEDO ST
#401
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

1400 SALZEDO ST
#401
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 59-2798643

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAURA ROSAS
13993 SW 94TH CIRCLE
APT. 3-102
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

ROSAS, LAURA
13993 SW 94TH CIRCLE
APT. 3-102
MIAMI, FL 33186 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: LAURA ROSAS

04/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VALLE, LUCY DEL
Address: 6829 SW 156TH COURT
City-St-Zip: MIAMI, FL 33193 US

Title: VP () Delete
Name: PHILLIPS, IRMA
Address: 7655 NW 19 CT
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: SD () Delete
Name: MORALES, LYDIA
Address: 521 SW 42 AVE #102
City-St-Zip: MIAMI, FL 33134 US

Title: TD () Delete
Name: VENEGAS, NORAH
Address: 1400 SALZEDO ST #401
City-St-Zip: CORAL GABLES, FL 22134 US

Title: ST () Delete
Name: PEDROGO, CARMEN
Address: 2814 OAKLEIGH LN
City-St-Zip: DAVIE, FL 33328 US

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: TD (X) Change () Addition
Name: VENEGAS, NORAH
Address: 1400 SALZEDO ST #401
City-St-Zip: CORAL GABLES, FL 33134 US

Title: ST (X) Change () Addition
Name: PEDROGO, CARMEN
Address: 2814 OAKLEIGH LANE
City-St-Zip: DAVIE, FL 33328 US

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: CARMEN PEDROGO

ST

04/23/2009

Electronic Signature of Signing Officer or Director

Date