2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002916

FILED Jan 03, 2008 Secretary of State

Entity Name: NATIONAL WOMEN BUSINESS OWNERS CORPORATION

Current P	rincipal Place	of Business:	New Principal Plac	New Principal Place of Business:	
927 15TH :	RSON SQUARI ST. NW12TH TON, DC 2000	l FL			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
SUITE 104	ARKWAY CALA I AS, CA 91302	ABASAS			
FEI Number:	52-1926398	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address	s of New Registered Agent:	
1001 WES	ANGE, JANET T JASMINE DF K, FL 33403	R#G US			
	named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its registe	red office or registered agent, or both,	
SIGNATUF					
	Electron	ic Signature of Registered Age		Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SLATER, PHYLI	PLAZA STE. LL-100	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HANEBORG, LÍI	EST EXPRESSWAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HARRIS-LANGE	MINE DRIVE #G	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () KASOFF, BARB 48 SAN ANTONI SAN FRANCISC	O PL.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DAVIS, TANA	Delete /AY CALABASAS A 91302	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () HOLIFIELD, PH 615 MAIN STRE N. LITTLE ROCI	ET	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: TANA DAVIS CFO 01/03/2008