

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005844

FILED
Feb 05, 2009
Secretary of State

Entity Name: NETWORK OF EXECUTIVE WOMEN IN HOSPITALITY, INC.

Current Principal Place of Business:

NEWH, INC.
N5836 FOESCH ROAD
SHAWANO, WI 54166

New Principal Place of Business:

Current Mailing Address:

N5836 FOESCH RD.
SHAWANO, WI 54166

New Mailing Address:

FEI Number: 95-4030150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: P () Delete
Name: STARLING, DAWN
Address: 9721 SW 120 STREET
City-St-Zip: MIAMI, FL 33176

Title: P () Delete
Name: POOLE, TRISHA
Address: 15 E. MELBOURNE
City-St-Zip: MELBOURNE, FL 32901

Title: T () Delete
Name: PRICE, LINDA
Address: 340 ROYAL POINCIANA WAY SUITE 306
City-St-Zip: PALM BEACH, FL 33480 US

Title: T () Delete
Name: SCHALLER, KATHERINE
Address: 605 E. ROBINSON STREET #410
City-St-Zip: ORLANDO, FL 32801

Title: S () Delete
Name: GILBERT, LOIS
Address: 8273 LISBON COURT
City-St-Zip: ORLANDO, FL 32836

Title: S () Delete
Name: GHAI, LISA
Address: 1050 CARIBBEAN WAY
City-St-Zip: MIAMI, FL 33132

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHAFFRAN, TINA
Address: 5359 PARK PLACE CIRCLE
City-St-Zip: BOCA RATON, FL 33486

Title: P (X) Change () Addition
Name: DOLAN GURSKY, MICHELLE
Address: 17801 FITCH STREET
City-St-Zip: IRVINE, CA 92714

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: ADAMS, KATHERINE
Address: 605 E. ROBINSON STREET #410
City-St-Zip: ORLANDO, FL 32801

Title: S (X) Change () Addition
Name: RANK, ANN
Address: 1200 ARTHUR AVENUE
City-St-Zip: ELK GROVE, IL 60007

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: MICHELLE DOLAN GURSKY

P

02/05/2009

Electronic Signature of Signing Officer or Director

Date