

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F03000002522

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Entity Name:** THE CENTER FOR WOMEN'S MINISTRIES, INCORPORATED

**Current Principal Place of Business:**

5580 PARK BLVD  
#5  
PINELLAS PARK, FL 33781

**New Principal Place of Business:**

**Current Mailing Address:**

5580 PARK BLVD  
#5  
PINELLAS PARK, FL 33781

**New Mailing Address:**

**FEI Number:** 35-1773172

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAYNES, MARY C  
5361 62ND AVE  
PINELLAS PARK, FL 33781 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  
Name: SCAGGS, LINDA L  
Address: 512 PARGRAVE PLACE  
City-St-Zip: BLOOMINGTON, IN 47403

Title: V  
Name: STEC, TERRY C  
Address: 410 E HARRISON STREET  
City-St-Zip: MARTINSVILLE, IN 46151

Title: S  
Name: BRAY, LINDA  
Address: RR 2, BOX 128  
City-St-Zip: JASONVILLE, IN 47438

Title: T  
Name: DILLON, ANN  
Address: 8378 E RYERSON ROAD  
City-St-Zip: PIERCETON, IN 46562

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: MARY C HAYNES

RA

04/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date