

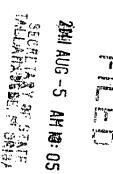
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## APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1	CHRISTIA	N WOMEN'S CEN	NTER, IN	IC.			
(Name of corporation for the name at pre-	CHRISTIAI tion: must include the word "INC e as will clearly indicate that it is sent. "Company" or "Co." may n	CORPORATED" or "CORI a corporation instead of a ot be used as a corporate so	PORATION" natural perso uffix by a nor	or words or abbr n or partnership i aprofit corporatio	eviations of f not so co n.)	flike ntained	
2	GEORGIA	3,	58	-1553259			
(State or countr	GEORGIA 3, 58-1553259  (State or country under the law of which it is incorporated) (FBI number, if applicable)						
4. 10/5/	1983 te of Incorporation)	5		N/A			
(Dat	e of Incorporation)	(Duration:	Year corp. wi	Il cease to exist o	r "b <del>erbetu</del> i	11")	
6	ted affairs in Plorida if prior to regi	N/A					
						liability.	.)
7. 174 5k	chool Rd. Si	(Principal office address)	GA	3028	4		
	PO BOX 7	73 SUNNY SIDE, GA	A 30284				
		(Current mailing address	s)	•	-		
8.	RECEIVE DONATIONS  poralion authorized in home stat	TO CORPORATION	i VIA THE	INTERNET			
(Purpose(s) of con	poralion authorized in home stat	e or country to be carried o	out in the state	e of Florida)	C H	-	
9. Name and street	t address of Florida registered	agent: (P.O. Box <u>NOT</u> a	acceptable)			BUN IN	£7.349
Name:	AGENTS AND CORPORA	ATIONS, INC.				2	Chance 1 Sales 2 Sales 2 Sales
Office Address: _	300 FIFTH AVENUE S	SOUTH, SUITE 101-	-330			AH NA	grands Grands
	NAPLES	, Florida _	34102		S CT	05	
<b></b>	(City)			(Zip Code)	***	O,	
Having been name designated in this further agree to co	gent's acceptance: ed as registered agent and to application, I hereby accept to amply with the provisions of a with and accept the obligation	he appointment as regis Il statutes relative to the	tered agent e oroner and	and agree to ac	t in this c	anácih.	u I
	AGENTS AND CORP	ORATIONS, INC.					
	11 11	111	0				
	Gron 1. Willi	Registered agent's signatur ands, Vice Presid	ent		-		
11. Attached is a c	pertificate of existence duly au	thenticated, not more tha	ın 90 days p	rior to delivery	of this ap	plicatio	n to

the Department of State, by the Secretary of State or other official having custody of corporate records in the

jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

## A. DIRECTORS Chairman: DARLENE BALLARD Address: 104 N MORGAN DR GRIFFIN, GA 30223 Vice Chairman; BONNIE BURRELL Address: 2008 TERRY LN DOUGLASSVILLE, GA 30135 Director: ANNE CLARK Address: 107 CHAPEAU LANE GRIFFIN, GA 30223 Director: MICHAEL NEEL Address: 719 MAPLE DR GRIFFIN, GA 30223 **B. OFFICERS** President: DARLENE BALLARD Address: 104 N MORGAN DR GRIFFIN, GA 30223 Vice President: BONNIE BURRELL Address: 2008 TERRY LN DOUGLASSVILLE, GA 30135 Secretary: ANNE CLARK Address: 107 CHAPEAU LANE GRIFFIN, GA 30223 Treasurer: MICHAEL NEEL Address: 719 MAPLE DR GRIFFIN, GA 30223 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Vice Chairman, or any officer listed in number 12 of the application) (Typed or printed name and papacity of person signing application)

Control No. J406500

# STATE OF GEORGIA

### Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

# CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

#### CHRISTIAN WOMEN'S CENTER, INC.

#### **Domestic Non-Profit Corporation**

was formed or was authorized to transact business on 10/05/1983 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 21st day of July, 2011

B:Ph

Brian P. Kemp Secretary of State

Certification Number: 7626941-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/yerify.asp