

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F99000006768

**FILED**  
**May 19, 2011**  
**Secretary of State**

**Entity Name:** WOMB, INC. (WORLD OUTREACH MINISTRIES... BIRTHING VISIONS FOR THE NATIONS)

**Current Principal Place of Business:**

3074 MARTELLO DRIVE  
MARGATE, FL 33063

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 670512  
CORAL SPRINGS, FL 33067

**New Mailing Address:**

**FEI Number:** 58-1977023

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLLYMORE, LEON N DR  
3074 MARTELLO DRIVE  
MARGATE, FL 33063 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: COLLYMORE, LEON DR.  
Address: 3074 MARTELLO DRIVE  
City-St-Zip: MARGATE, FL 33063

Title: D  
Name: RAMDASS, KEITH REV.  
Address: PO BOX 3579  
City-St-Zip: LA ROMAIN, TRINIDAD, WI

Title: S  
Name: LEE-BLACKMAN, HOLDA REV.  
Address: 67 GRANITE ST  
City-St-Zip: BROOKLYN, NY 11207

Title: D  
Name: ANDREW, ALONZO  
Address: 16301 SW 145 CT  
City-St-Zip: MIAMI, FL 33177

Title: D  
Name: COURTNEY, POINTER  
Address: 2295 E 4TH STREET 1ST FLOOR  
City-St-Zip: BROOKLYN, NY 11223

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: LEONCOLLYMORE

P

05/19/2011

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

\_\_\_\_\_  
Date