2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000025841

Entity Name: WOMEN ABOARD, LLC

FILED May 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

816 EXECUTIVE DRIVE 226 SHADY OAKS CIRCLE OVIEDO, FL 32765 LAKE MARY, FL 32746

Current Mailing Address: New Mailing Address:

226 SHADY OAKS CIRCLE LAKE MARY, FL 32746 US

FEI Number: 16-1630296 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

TBS BUSINESS SERVICES 226 SHADY OAKS CIRCLE LAKE MARY, FL 32746

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:

Date

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent

(X) Change () Addition

MANAGING MEMBERS/MANAGERS:

Title: () Delete

KLAPUT, CORINNE M Name: Name: TANZER, BARBARA A Address: 811 S. 2ND STREET Address: 226 SHADY OAKS CIRCLE City-St-Zip: SAINT CHARLES, IL 60174 US City-St-Zip: LAKE MARY, FL 32746 US

(X) Change () Addition Title: MGRM () Delete Title: MGRM

Name: TANZER, BARBARA A Name: COLEMAN, LAURELYN

Address: 226 SHADY OAKS CIRCLE Address: 909 MARINA VILLAGE PARKWAY City-St-Zip: LAKE MARY, FL 32746 US City-St-Zip: ALAMEDA, CA 94501 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BARBARA A TANZER **MRGM** 05/25/2008