2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2009
Secretary of State

DOCUMENT# N01000003012

Entity Name: WOMEN IN THE MINISTRY NETWORK, INC.

Current Principal Place of Business:

3466 OLD DIXIE HWY.
BOYNTON BCH, FL 33435

New Principal Place of Business:

3466 OLD DIXIE HWY.
DELRAY BEACH, FL 33483

Current Mailing Address:

P.O. BOX 1573
BOYNTON BCH, FL 33435

New Mailing Address:

FEI Number: 52-2331035 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DARVILLE, ANNIE
516 NW 5TH ST.
BOYNTON BCH, FL 33435 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: NP ( ) Delete
Name: DARVILLE, ANNIE
Address: 516 NW 5TH ST.
City-St-Zip: BOYNTON BCH, FL 33435

Title: S ( ) Delete
Name: PROBY, KATHERINE
Address: 232 NW 5TH AVE
City-St-Zip: DELRAY BEACH, FL 33444

Title: T ( ) Delete
Name: WILLIAMS, DORIS
Address: 5037 ASHLEY LAKE DRIVE APT #115
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ANNIE DARVILLE NP 04/18/2009

Electronic Signature of Signing Officer or Director — Date