

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003300

FILED
Sep 04, 2007
Secretary of State

Entity Name: WOMEN WITH A PURPOSE, INC.

Current Principal Place of Business:

P O BOX 970413
MIAMI, FL 33197

New Principal Place of Business:

16803 SW 107 PLACE
MIAMI, FL 33157

Current Mailing Address:

P O BOX 970413
MIAMI, FL 33197

New Mailing Address:

FEI Number: 02-0545392 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BROWN, SHUNDA T
16803 SW 107 PLACE
MIAMI, FL 33157 US

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: PD () Delete
Name: BROWN, SHUNDA T
Address: 16803 SW 107 PLACE
City-St-Zip: MIAMI, FL 33157

Title: VP () Delete
Name: DARLING, KELVINA
Address: 16803 SW 107 PLACE
City-St-Zip: MIAMI, FL 33157

Title: SD () Delete
Name: SMITH, MARJORIE
Address: 10021 MARTINIQUE DR
City-St-Zip: MIAMI, FL 33189

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: DARLING, KELVINA
Address: 9400 SW 222 LANE
City-St-Zip: MIAMI, FL 33189

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: SHUNDA T. BROWN

PD

09/04/2007

Electronic Signature of Signing Officer or Director

Date