

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000744

Entity Name: BLACK WOMEN OF ESSENCE, INC.

FILED  
Feb 13, 2004  
Secretary of State

## Current Principal Place of Business:

1568 WOODWIND DRIVE  
APOPKA, FL 32703

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 681835  
ORLANDO, FL 32868

## New Mailing Address:

P.O. BOX 681835  
ORLANDO, FL 32868 US

FEI Number: 01-0584372

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ELLIS, RENEE G  
1568 WOODWIND DRIVE  
APOPKA, FL 32703 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: DP ( ) Delete  
Name: ELLIS, RENEE G  
Address: 1568 WOODWIND DRIVE  
City-St-Zip: APOPKA, FL 32703 US

Title: DV ( ) Delete  
Name: MAXEY, JOI  
Address: 1400 LAKE SHADOW CIRCLE, #10205  
City-St-Zip: MAITLAND, FL 32751 US

Title: DVS ( ) Delete  
Name: JEAN-BAPTISTE, MAGGIE  
Address: 2515 SANDY LANE  
City-St-Zip: ORLANDO, FL 32818 US

Title: T ( ) Delete  
Name: DAVIS, DELORA  
Address: 245 CUSTER AVENUE  
City-St-Zip: EVANSTON, IL 60202 US

Title: D (X) Delete  
Name: CASSEY, LYNDIA  
Address: 4640 SURAY AVE.  
City-St-Zip: JACKSONVILLE, FL 32208 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DV (X) Change ( ) Addition  
Name: JEAN-BAPTISTE, MAGGIE  
Address: 4420 MARTIN'S WAY , APT G  
City-St-Zip: ORLANDO, FL 32808 US

Title: DS (X) Change ( ) Addition  
Name: BARLOW, CHERYL  
Address: 7347 LAWN TENNIS LANE  
City-St-Zip: JACKSONVILLE, FL 32277 US

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 for the exemption stated in Section 119.07(3)(i), 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: RENEE G. ELLIS

DP

02/13/2004

Electronic Signature of Signing Officer or Director

Date