

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000000744

FILED
Jan 30, 2003
Secretary of State

Entity Name: BLACK WOMEN OF ESSENCE, INC.

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:

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
105 E. ROBINSON STREET
4TH FLOOR
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

ELLIS, RENEE G
1568 WOODWIND DRIVE
APOPKA, FL 32703 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: RENEE G. ELLIS

01/30/2003

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: SMITH, DARCELL
Address: 4918 N. SPAULDING AVE
City-St-Zip: CHICAGO, IL 60625 US

Title: DVS () Delete
Name: DERRING, URALEE
Address: 2722 RHOADES RD.
City-St-Zip: SAN DIEGO, CA 92139 US

Title: T () Delete
Name: WASHINGTON, TERRI
Address: 15621 TERRACE RD
City-St-Zip: EAST CLEVELAND, OH 44112 US

Title: T () Delete
Name: DAVIS, DELORA
Address: 245 CUSTER AVE
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: MAXEY, JOI
Address: 1400 LAKE SHADOW CIRCLE, #10205
City-St-Zip: MAITLAND, FL 32751 US

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

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

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

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

01/30/2003

Electronic Signature of Signing Officer or Director

Date