

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004546

FILED
Feb 18, 2009
Secretary of State

Entity Name: TRINITARIAN HANDMAIDS OF THE DIVINE WORD, INC.

Current Principal Place of Business:

12365 CASHEROS COVE DR, S
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

12365 CASHEROS COVE DR, S
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 30-0093939

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

UY, VICENTE
12297 HINDMARSH CIRCLE
JACKSONVILLE, FL 32225 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: TAPALES, PATRICIA
Address: 12365 CASHEROS COVE DR, S
City-St-Zip: JACKSONVILLE, FL 32225

Title: DV () Delete
Name: OMAMALIN, GRACELA
Address: 12365 CASHEROS COVE DRIVE, S
City-St-Zip: JACKSONVILLE, FL 32225

Title: DST () Delete
Name: ADCAN, JOVELYN
Address: 12365 CASHEROS COVE DRIVE, S
City-St-Zip: JACKSONVILLE, FL 32225

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: SR. MA. PATRICIA O. TAPALES, THDW

DP

02/18/2009

Electronic Signature of Signing Officer or Director

Date