2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# N02000004572

Entity Name: DAUGHTERS OF NAOMI, INC.

Current Principal Place of Business:

665 HOWARD ST
FT PIERCE, FL 34982

New Principal Place of Business:

Current Mailing Address:

665 HOWARD ST
FT PIERCE, FL 34982

New Mailing Address:

FEI Number: 11-3643449 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GEORGE, SANDRA D
665 HOWARD ST
FT PIERCE, FL 34982 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:	DC	( ) Delete
Name:	GEORGE, STUART W DVM	
Address:	665 HOWARD ST	
City-St-Zip:	FT PIERCE, FL 34982	
Title:	DP	( ) Delete
Name:	GEORGE, SANDRA D	
Address:	665 HOWARD ST	
City-St-Zip:	FT PIERCE, FL 34982	
Title:	D	( ) Delete
Name:	TOWNSEND-KING, CATHY	
Address:	3601 N A1A	
City-St-Zip:	FORT PIERCE, FL 34949	
Title:	D	( ) Delete
Name:	WORD, TRACY	
Address:	2367 WINDSOR WAY	
City-St-Zip:	BARTLESVILLE, OK 74006	
Title:	DS	( ) Delete
Name:	HANSON, JOLYNN	
Address:	7993 SADDLEBROOK DR	
City-St-Zip:	PORT ST. LUCIE, FL 34986	
Title:	D	( ) Delete
Name:	BRIDGERS, CRAIG	
Address:	1204 SW DEL RIO BLVD	
City-St-Zip:	PORT SAINT LUCIE, FL 34986	

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:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	MIRET, KAREN	
Address:	7950 POPPY HILLS LANE	
City-St-Zip:	PORT ST. LUCIE, FL 34986	
Title:	D	(X) Change ( ) Addition
Name:	RINDERKNECHT, LINDA	
Address:	2225 SE SEAMIST STREET	
City-St-Zip:	PORT SAINT LUCIE, FL 34952	

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: SANDRA GEORGE DP 04/27/2007

Electronic Signature of Signing Officer or Director — Date