

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006198

FILED  
May 31, 2007  
Secretary of State

Entity Name: SISTERS IN THE SPIRIT, INC.

**Current Principal Place of Business:**

1585 W 34TH STREET  
RIVIERA BEACH, FL 33404

**New Principal Place of Business:**

**Current Mailing Address:**

1585 W 34TH STREET  
RIVIERA BEACH, FL 33404

**New Mailing Address:**

FEI Number: 04-3709053      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

PALMER, LINDA CPA  
310 35 STREET  
WEST PALM BEACH, FL 33407      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: D      ( ) Delete  
Name: ROLLE, STEPHANIE  
Address: 1585 W 34TH STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D      ( ) Delete  
Name: LAZIER, E. BERNADINE  
Address: 1660 WEST 31 STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D      ( ) Delete  
Name: HAWKINS, LINDA  
Address: 16820 SW 109 AVE  
City-St-Zip: MIAMI, FL 33157

Title: D      ( ) Delete  
Name: BOUIE, SABRINA B  
Address: 19610 WEST OAKMONT DRIVE  
City-St-Zip: MIAMI, FL 33015

Title: D      ( ) Delete  
Name: CAMERON, CONSTANCE  
Address: 221 NW 201 AVE  
City-St-Zip: PEMBROKE PINES, FL 33209

**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:      ( ) 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: STEPHANIE D. ROLLE

FOUN

05/31/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date