

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000281

FILED
Mar 20, 2007
Secretary of State

Entity Name: THE WOMEN'S CIRCLE, INC.

Current Principal Place of Business:

145 NE 4TH AVE
BOYNTON BEACH, FL 334250339

New Principal Place of Business:

Current Mailing Address:

145 NE 4TH AVE
BOYNTON BEACH, FL 334250339

New Mailing Address:

FEI Number: 65-1068376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D'ALMEIDA, ARTHUR B
105 E PALMETTO PARK RD
BOCA RATON, FL 33432 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: D () Delete
Name: RYAN, LORRAINE MMS
Address: 4769 A QUAILWOOD CRESCENT
City-St-Zip: BOCA RATON, FL 33486

Title: P () Delete
Name: CARUSILLO, JOAN CSC
Address: 1124 SW 11TH ST.
City-St-Zip: BOCA RATON, FL 33486

Title: S () Delete
Name: GRESS, BARBARA CSC
Address: 2335 EDGEWATER DR
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D () Delete
Name: RENE, YVETTE
Address: 8240 WHITEROCK CIR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VP () Delete
Name: JENKINS, ELIZABETH
Address: 711 NW 1ST STREET
City-St-Zip: BOYNTON BEACH, FL 33435

Title: T () Delete
Name: SIEGEL, RICHARD
Address: 4505 S OCEAN BLVD #106
City-St-Zip: BOCA RATON, FL 33487

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:

Title: T (X) Change () Addition
Name: LEAVITT, MARIE C
Address: 3455 LAKE VIEW DRIVE
City-St-Zip: DELRAY BEACH, FL 33445

I hereby certify that the information supplied with this filing does not qualify for the 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: JOAN CAUSILLO CSC

P

03/20/2007

Electronic Signature of Signing Officer or Director

Date