2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003101

FILED Aug 27, 2005 Secretary of State

Entity Name: CENTER FOR CHRISTIAN WOMEN'S SPIRITUALITY, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
2500 LAKE MARY BLVD., SUITE 101 LAKE MARY, FL 32746			5151 LAKE HOWELL RD WINTER PARK, FL 32792	
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
2500 LAKE MARY BLVD., SUITE 101 LAKE MARY, FL 32746			5151 LAKE HOWELL RD WINTER PARK, FL 32792	
	:: 61-1427824 FEI Number Applied For() FEI nce with s. 607.193(2)(b), F.S., the corporation did not rece	Number Not Applicable() ive the prior notice.	Certificate of Status Desired ()	
Name and	d Address of Current Registered Agent:	Name and Address	of New Registered Agent:	
PALLISTER-WALTHER, AILEEN 2500 LAKE MARY BLVD., SUITE 101 LAKE MARY, FL 32746 US		PALLISTER-WALTH 5151 LAKE HOWELL WINTER PARK, FL	_ RĎ	
	e named entity submits this statement for the purpose of Florida.	se of changing its register	ed office or registered agent, or both,	
SIGNATURE: AILEEN PALLISTER-WALTHER			08/27/2005	
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	D () Delete PALLISTER-WALTHER, AILEEN 255 SILK BAY PL. LONGWOOD, FL 327508405	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () Delete NORONHA, WANDA 515 NANTUCKET CT., #204 ALTAMONTE SPRINGS, FL 32714	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () Delete WILLIAMS, KAREN 12206 WINDERMERE CROSSING CIR. WINTER GARDEN, FL 34787	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	TD () Delete LOGUE, FRANCES 1205 N. OBSERVATORY DR. ORLANDO, FL 32818	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: AILEEN PALLISTER-WALTHER DIR 08/27/2005