2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# N03000006383

Entity Name: WOMEN OF INTEGRITY INC

Current Principal Place of Business:

972 WEST HALLANDALE BEACH BLVD
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

972 W HALLANDALE BEACH BLVD.
HALLANDALE, FL 33009

New Mailing Address:

FEI Number: 54-2104121 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARSHALL, CAROLYN
972 WEST HALLANDALE BEACH BLVD
HALLANDALE, FL 33009 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:	V	( ) Delete
Name:	WOODEN, JEANNE	
Address:	5475 HWY 90 E	
City-St-Zip:	MARIANNA, FL	
Title:	BD	( ) Delete
Name:	BLACK, NELLIE MAE	
Address:	2712 POPULAR SPRING RD.	
City-St-Zip:	MARIANNA, FL 32446	
Title:	BD	( ) Delete
Name:	ROGERS, SOPHIA	
Address:	11050 SW 197 ST., APT. 208C	
City-St-Zip:	MIAMI, FL 33157	
Title:	BD	( ) Delete
Name:	WILLIS, MILDRED	
Address:	10745 SW 274 ST.	
City-St-Zip:	MIAMI, FL 33177	
Title:	P	( ) Delete
Name:	MARSHALL, CAROLYN	
Address:	3460 SW 143RD AVE.	
City-St-Zip:	MIRAMAR, FL 33027	

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: CAROLYN MARSHALL P 04/16/2009

Electronic Signature of Signing Officer or Director — Date