

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010717

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** THE ELITE WOMEN OF ZION COMMUNITY DEVELOPMENT, INC.

**Current Principal Place of Business:**

8346 SUNNY ACRES LN.  
PENSACOLA, FL 32514 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 10172  
PENSACOLA, FL 32524 US

**New Mailing Address:**

**FEI Number:** 52-2406812      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

GRACE-COLLINS, KATHERINE  
2720 W. JACKSON STREET  
PENSACOLA, FL 32505 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: P ( ) Delete  
Name: YOUNG, DORIS Y  
Address: 8346 SUNNY ACRES LANE  
City-St-Zip: PENSACOLA, FL 32514

Title: V ( ) Delete  
Name: BRAGG, CAROLYN  
Address: 324 VERA STREET  
City-St-Zip: PENSACOLA, FL 32514

Title: T ( ) Delete  
Name: GRACE-COLLINS, KATHERINE  
Address: 2720 W. JACKSON ST  
City-St-Zip: PENSACOLA, FL 32505

Title: S ( ) Delete  
Name: YOUNG, JUANITA  
Address: 8346 SUNNY ACRES LANE  
City-St-Zip: PENSACOLA, FL 32514

Title: D ( ) Delete  
Name: YOUNG, CARLA  
Address: 3332 TWO SISTERS WAY  
City-St-Zip: PENSACOLA, FL 32505

Title: D ( ) Delete  
Name: WILLIAMS, RUTH  
Address: 8342 SUNNY ACRES LANE  
City-St-Zip: PENSACOLA, FL 32514

**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: ( ) 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: DORIS Y. YOUNG

PRES

04/30/2009

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

\_\_\_\_\_  
Date