2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

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RT FILED
Dec 07, 2005
Secretary of State

Entity Name: WOMEN FOR WOMEN FOUNDATION, INCORPORATED **Current Principal Place of Business: New Principal Place of Business:** 200 W. WELBOURNE AVE. SUITE 7 WINTER PARK, FL 32789 **New Mailing Address: Current Mailing Address:** 200 W. WELBOURNE AVE. SUITE 7 WINTER PARK, FL 32789 FEI Number: 56-2443603 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCLEOD, W. EDWARD HAMRICK, ALEX H ESQ W. EDWARD MCLEOD, P.A. SHUFFIELD, LOWMAN & WILSON, P.A. 284 PARK AVE N 1000 LEGION PLACE, SUITE 1700 WINTER PARK, FL 32789 US ORLANDO, FL 32801 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: ALEX H. HAMRICK 12/07/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition LINDERS, JEANETTE V CLEEVELEY, SANDI Name: Name: 200 W. WELBOURNE AVE., SUITE 7 Address: 200 W. WELBOURNE AVE., SUITE 7 Address: WINTER PARK, FL 32789 City-St-Zip: City-St-Zip: WINTER PARK, FL 32789 Title: Title: (X) Change () Addition () Delete MILLER, MARTI Name: HULL, MIMI DR Name: Address: 200 W. WELBOURNE AVE., SUITE 7 Address: 200 W. WELBOURNE AVE., SUITE 7 City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: WINTER PARK, FL 32789 Title: () Delete Title: (X) Change () Addition GRAY, MARIANNE LANGDON, SHEILA Name: Name: Address: 200 W. WELBOURNE AVE., SUITE 7 200 W. WELBOURNE AVE., SUITE 7 Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: WINTER PARK, FL 32789 Title: () Delete Title: () Change (X) Addition PETERSON, JUDY Name: Name: 200 W. WELBOURNE AVE., SUITE 7 Address: Address: City-St-Zip: City-St-Zip: WINTER PARK, FL 32789 Title: () Delete Title: () Change (X) Addition SLOVIN, EDE Name: Name: 200 W. WELBOURNE AVE., SUITE 7 Address: Address: City-St-Zip: City-St-Zip: WINTER PARK, FL 32789 Title: () Delete Title: () Change (X) Addition WHITEHURST, KIM Name: Name: Address: Address: 200 W. WELBOURNE AVE., SUITE 7 WINTER PARK, FL 32789 City-St-Zip: City-St-Zip:

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: KIM WHITEHURST ED 12/07/2005