

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Oct 17, 2009**  
**Secretary of State**

DOCUMENT# N04000004086

**Entity Name:** WOMEN PLAYWRIGHTS' INITIATIVE INC**Current Principal Place of Business:**783A FORMOSA AVE  
WINTER PARK, FL 32789**New Principal Place of Business:**783A FORMOSA AVENUE  
WINTER PARK, FL 32789**Current Mailing Address:**783A FORMOSA AVE  
WINTER PARK, FL 32789**New Mailing Address:**PO BOX 1546  
ORLANDO, FL 328021546 US**FEI Number:** 56-2455764**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MILLER, COURTNEY  
783A FORMOSA AVE  
WINTER PARK, FL 32789 US**Name and Address of New Registered Agent:**MILLER, COURTNEY  
783A FORMOSA AVENUE  
WINTER PARK, FL 32789 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: \_\_\_\_\_

10/17/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** PREZ ( ) Delete  
**Name:** MILLER, COURTNEY  
**Address:** 783A FORMOSA AVE  
**City-St-Zip:** WINTER PARK, FL 32789**Title:** PREZ ( ) Delete  
**Name:** GAGNE, JULIA  
**Address:** 3006 HARTLAND CIR  
**City-St-Zip:** ORLANDO, FL 32825**Title:** VP ( ) Delete  
**Name:** LINDSEY, KATHLEEN  
**Address:** 2500 LEE ROAD #106  
**City-St-Zip:** WINTER PARK, FL 32789**Title:** SECR ( ) Delete  
**Name:** HORN, OLIVIA  
**Address:** 531 E. ESTHER STREET  
**City-St-Zip:** ORLANDO, FL 32806**Title:** COMM (X) Delete  
**Name:** CARROLL, MARISA  
**Address:** 1295 Y2 RICHMOND RD  
**City-St-Zip:** WINTER PARK, FL 32789**Title:** TREA (X) Delete  
**Name:** BATTISTE, CECIL  
**Address:** 2514 WOODS EDGE CIRCLE  
**City-St-Zip:** ORLANDO, FL 32817**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** TREA (X) Change ( ) Addition  
**Name:** MILLER, COURTNEY  
**Address:** 783A FORMOSA AVENUE  
**City-St-Zip:** WINTER PARK, FL 32789**Title:** PREZ (X) Change ( ) Addition  
**Name:** AVERY, NICOLLE  
**Address:** 1209 PORTLAND AVENUE  
**City-St-Zip:** ORLANDO, FL 32803**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** SECR (X) Change ( ) Addition  
**Name:** SNOWDEN, MELISSA  
**Address:** 457 CANARY ISLAND COURT  
**City-St-Zip:** ORLANDO, FL 32828**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: COURTNEY MILLER

TREA

10/17/2009

Electronic Signature of Signing Officer or Director

Date