2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N04000004310

1. Entity Name
WOMEN'S REAL TALK & EMPOWERMENT MINISTRIES, INC. Amended – name change enclosed

FILED
05 MAY -3 AM 10:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
2247 NW 77 TER PEMBROKE PINES, FL 33024	P.O. BOX 840933 PEMBROKE PINES, FL 33084

04192005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 73-1701381 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WILLIAMS, LAURNA 7161 PEMBROKE RD #600 PEMBROKE PINES, FL 33023	Name: Lucious Hall Street Address (P.O. Box Number is Not Acceptable): 2247 N.W. 77 Ter. City: Pembroke Pines FL Zip Code: 33024

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Lucious Hall DATE: 4/20/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PCEO HALL, BETSY 2247 NW 77 TER PEMBROKE PINES, FL 33024	☐ Delete	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HALL, BETSY 2247 NW 77 TER PEMBROKE PINES, FL 33024	☒ Delete	☐ Change ☒ Addition	VP, T Jessica Hall 2247 NW. 77 Ter. Pembroke Pines, FL 33024
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V LEE, LAVERNA 2704 SW 128 AVE MIRAMAR, FL 33027	☒ Delete	☐ Change ☐ Addition	700054027177 05/09/05--01001--004 **25
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S JACKSON-ANDERSON, LAVERN 777 NW 155 LN #522 MIAMI, FL 33169	☒ Delete	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MCNEIL-HOWARD, RUTH 150 SW 134 WAY CONDO R-130 NEW HAMPTON PEMBROKE PINES, FL 33027	☐ Delete	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	☐ Change ☐ Addition	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Betsy Hall 4/20/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

T. Lewis