

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005472

FILED
Mar 06, 2009
Secretary of State

Entity Name: THE WOMEN STARS, INC.

Current Principal Place of Business:

827 VILAGE DR
BROOKSVILLE, FL 34601

New Principal Place of Business:

827 VILLAGE DR
BROOKSVILLE, FL 34601

Current Mailing Address:

20 SOUTH BROAD STREET
BROOKSVILLE, FL 34601

New Mailing Address:

827 VILLAGE DR
BROOKSVILLE, FL 34601

FEI Number: 20-1194996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE HOGAN LAW FIRM, LLC
20 SOUTH BROAD STREET
BROOKSVILLE, FL 34601 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: BOLES, FLO
Address: 827 VILLAGE DR
City-St-Zip: BROOKSVILLE, FL 34601

Title: VP () Delete
Name: COLLETTI, SHEILA
Address: 9254 S CEPTER AVE
City-St-Zip: BROOKSVILLE, FL 34613

Title: T () Delete
Name: PALMERI, ARLENE
Address: 2106 WATERVIEW TERR
City-St-Zip: SPRING HILL, FL 34606

Title: S () Delete
Name: MORTAK, EVA
Address: 9838 SCEPTER AVE
City-St-Zip: BROOKSVILLE, FL 34613

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:

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: ARLENE PALMERI

SEC

03/06/2009

Electronic Signature of Signing Officer or Director

Date