2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2008
Secretary of State

DOCUMENT# N04000007863

Entity Name: WOMEN IN THE GOLF INDUSTRY, INC.

Current Principal Place of Business:

158 ANNANDALE DRIVE EAST
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

158 ANNANDALE DR EAST
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 36-4491405 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THODE, DEBORAH
158 ANNANDALE DR EAST
JACKSONVILLE, FL 32225 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: DP ( ) Delete
Name: BISSELL, KATHLEEN
Address: P O BOX 1424
City-St-Zip: PONTE VEDRA BEACH, FL 32004

Title: DV ( ) Delete
Name: HARPER-ELDER, ROSE
Address: P O BOX 5874
City-St-Zip: WASHINGTON, DC 20016

Title: DV ( ) Delete
Name: CAN'TRELL, KAREN
Address: 42412 BOB HOPE DR
City-St-Zip: RANCHO MIRAGE, CA 92270

Title: DS ( ) Delete
Name: HANSON, BARB
Address: 3400 GLYNWATER TRAIL NW
City-St-Zip: PRIOR LAKE, MN 55372

Title: DS ( ) Delete
Name: WAITKUS, DEBBIE
Address: 3733 E ATLANTA AVE
City-St-Zip: PHOENIX, AZ 85040

Title: DT (X) Delete
Name: THODE, DEBORAH
Address: 158 ANNANDALE DR EAST
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change ( ) Addition
Name: THODE, DEBORAH L T
Address: 158 ANNANDALE DR E
City-St-Zip: JACKSONVILLE, FL 32225

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: DEBORAH L THODE DT 02/01/2008

Electronic Signature of Signing Officer or Director — Date