

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000012134

FILED  
Mar 11, 2007  
Secretary of State

Entity Name: WOMEN OF INTEGRITY NETWORKING INC.

**Current Principal Place of Business:**

275 CENTENNIAL AVE  
PISCATAWAY, NJ 08854

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 8175  
PISCATAWAY, NJ 08855

**New Mailing Address:**

FEI Number: 43-2074989

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: MCCALLA, CLARA  
Address: P.O. BOX 8175  
City-St-Zip: PISCATAWAY, NJ 08855

Title: V ( ) Delete  
Name: BALDE, ROSALIA  
Address: P.O. BOX 8175  
City-St-Zip: PISCATAWAY, NJ 08855

Title: V ( ) Delete  
Name: JOSEPH, LAUREN  
Address: 7100 SUNSHINE SKYWAY LANE SO.  
City-St-Zip: ST. PETERSBURG, FL 33711

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MCCALLA, CLARA  
Address: P.O. BOX 1481  
City-St-Zip: PISCATAWAY, NJ 08855

Title: V (X) Change ( ) Addition  
Name: BALDE, ROSALIA  
Address: P.O. BOX 1481  
City-St-Zip: PISCATAWAY, NJ 08855

Title: V (X) Change ( ) Addition  
Name: JOSEPH, LAUREN  
Address: 5404 LANDING VIEW CT.  
City-St-Zip: ROSHARON,, TX 77583 21

I hereby certify that the information supplied with this filing does not qualify for the 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: CLARA MCCALLA

PRES

03/11/2007

Electronic Signature of Signing Officer or Director

Date