

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003974

FILED
Apr 28, 2009
Secretary of State

Entity Name: WOMEN'S LIFE LINE INC

Current Principal Place of Business:

421 NINA RD
TALLAHASSEE, FL 32304

New Principal Place of Business:

11056 BRIGADE DR.
TALLAHASSEE, FL 32305

Current Mailing Address:

11056 BRIGADE DR.
TALLAHASSEE, FL 32305

New Mailing Address:

FEI Number: 83-0449863 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUNN, JO LAIRSEY
421 NINA RD
TALLAHASSEE, FL 32304 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: D () Delete
Name: GUNN, JO LAIRSEY
Address: 11056 BRIGADE DR.
City-St-Zip: TALLAHASSEE, FL 32305

Title: D () Delete
Name: MCCRAY, CAROLYN
Address: 421 NINA RD
City-St-Zip: TALLAHASSEE, FL 32304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JO LAIRSEY GUNN

D

04/28/2009

Electronic Signature of Signing Officer or Director

Date