2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2006
Secretary of State

DOCUMENT# N05000005939

Entity Name: ALAMOTH WOMEN'S CENTER, INC>

Current Principal Place of Business:

1895 E GRAVES AVENUE
ORANGE CITY, FL 32774

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 741147
ORANGE CITY, FL 32774

New Mailing Address:

FEI Number: 42-1683224 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CRANE, JOIE W MRS.
44 FAIRWAY DRIVE
DEBARY, FL 32713 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: RICHARDSON, ROBERT M REV.
Address: 103 RIDGECREST DRIVE
City-St-Zip: EUSTIS, FL 32726

Title: S/T ( ) Delete
Name: CRANE, JOIE W MRS.
Address: P.O. BOX 741147
City-St-Zip: ORANGE CITY, FL 32774

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 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: MRS. JOIE CRANE S/T 04/25/2006

Electronic Signature of Signing Officer or Director — Date