

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005311

FILED
Feb 03, 2009
Secretary of State

Entity Name: WOMEN OF THE WELL INTERNATIONAL MINISTRIES, INC.

Current Principal Place of Business:

841 MAPLE SPRINGS LANE
JACKSONVILLE, FL 32221

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 37482
JACKSONVILLE, FL 32236

New Mailing Address:

P.O. BOX 549
MOUNTAIN HOME, NC 28758

FEI Number: 20-4884084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

APPLEBY, PATRICIA K
841 MAPLE SPRINGS LANE
JACKSONVILLE, FL 32221 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: PD () Delete
Name: APPLEBY, PATRICIA K
Address: 841 MAPLE SPRINGS LANE
City-St-Zip: JACKSONVILLE, FL 32221

Title: D () Delete
Name: SHOEMAKER, CHARLES T
Address: 10482 HAMLET TERR
City-St-Zip: JACKSONVILLE, FL 32221

Title: D () Delete
Name: SHANK, GRACE
Address: 1302 RANDOM RIDGE DR
City-St-Zip: WESTMINSTER, MD 21157

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:

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: PATRICIA KAY APPLEBY

PD

02/03/2009

Electronic Signature of Signing Officer or Director

Date