2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 16, 2007
Secretary of State

DOCUMENT# N06000006512

Entity Name: WOMEN OF AUTHORITY, INC.

Current Principal Place of Business:

4395 18TH AVENUE N. E.
NAPLES, FL 34120

New Principal Place of Business:

1696 19TH ST SW
NAPLES, FL 34117

Current Mailing Address:

501 GOODLETTE ROAD
SUITE B204
NAPLES, FL 34102

New Mailing Address:

FEI Number: 20-5066200 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ACCOUNTING & CLERICAL BY REEVES & ASSOC.
501 GOODLETTE ROAD
SUITE B204
NAPLES, FL 34102 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: WANDA REEVES

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D P ( ) Delete
Name: GOLEMON, PEARL A
Address: 4395 18TH AVENUE N. E.
City-St-Zip: NAPLES, FL 34120

Title: D VP ( ) Delete
Name: GOLEMON, ALYSSA
Address: 4395 18TH AVENUE N. E.
City-St-Zip: NAPLES, FL 34120

Title: D S ( ) Delete
Name: YOUNG-SMITH, HELEN
Address: 2155 NW 130TH STREET
City-St-Zip: MIAMI, FL 33167

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D P (X) Change ( ) Addition
Name: GOLEMON, PEARL A
Address: 1696 19TH ST SW
City-St-Zip: NAPLES, FL 34117

Title: D VP (X) Change ( ) Addition
Name: GOLEMON, ALYSSA
Address: 1696 19TH ST SW
City-St-Zip: NAPLES, FL 34117

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: PEARL A GOLEMON DP 10/16/2007

Electronic Signature of Signing Officer or Director — Date