

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006999

FILED
Apr 28, 2009
Secretary of State

Entity Name: WOMEN IN THE ARTS, INC

Current Principal Place of Business:

8150 DIAMOND COVE CIRCLE
ORLANDO, FL 32836

New Principal Place of Business:

Current Mailing Address:

PO BOX 22618
LAKE BUENA VISTA, FL 32830

New Mailing Address:

FEI Number: 20-5090019

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUERRERO, MARIA
8150 DIAMOND COVE CIRCLE
ORLANDO, FL 32836 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: GUERRERO, MARIA
Address: 8150 DIAMOND COVE CIRCLE
City-St-Zip: ORLANDO, FL 32836

Title: D () Delete
Name: GOODMAN, TANYA
Address: 1005 FEATHERSTONE CIR.
City-St-Zip: OCOEE, FL 34761

Title: D () Delete
Name: NASTASI, SUSAN
Address: 7441 CLARCONA
City-St-Zip: OCOEE, FL 32818

Title: D () Delete
Name: OLIVER, ERIKA
Address: 1909 CAROLINA AVE.
City-St-Zip: GOTH A, FL 34734

Title: D () Delete
Name: OWENS, DOROTHY
Address: 12931 TIGER LILY CT.
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: TORREGROSA, SUSAN
Address: 6330 FOX BRIAR TR.
City-St-Zip: ORLANDO, FL 32818

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: NASTASI, SUSAN
Address: 196 TILDENVILLE SCHOOL ROAD
City-St-Zip: WINTER GARDEN, FL 34787

Title: D (X) Change () Addition
Name: OLIVER, ERIKA
Address: 2865 POLANA ST #107
City-St-Zip: ORLANDO, FL 32835

Title: D (X) Change () Addition
Name: CONLEY, MARLENE
Address: 4707 MIRANDA CIRCLE
City-St-Zip: ORLANDO, FL 32818

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: MARIA GUERRERO

PRES

04/28/2009

Electronic Signature of Signing Officer or Director

Date