

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007887

FILED  
Jan 05, 2008  
Secretary of State

Entity Name: SISTERSECRETS,CORP.

## Current Principal Place of Business:

1606 WOOD VIOLET DR.  
ORLANDO, FL 32824

## New Principal Place of Business:

## Current Mailing Address:

1606 WOOD VIOLET DR.  
ORLANDO, FL 32824

## New Mailing Address:

P.O.BOX 770811  
ORLANDO, FL 32877

FEI Number: 34-2063828

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WALKER, KRISTAL S  
1606 WOOD VIOLET DR.  
ORLANDO, FL 32824 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: WALKER, SANDRA  
Address: 1606 WOOD VIOLET DR.  
City-St-Zip: ORLANDO, FL 32824

Title: VP ( ) Delete  
Name: WALKER, KRISTAL S  
Address: 1606 WOOD VIOLET DR.  
City-St-Zip: ORLANDO, FL 32824

Title: OM ( ) Delete  
Name: JONES, JONTAE N  
Address: 4312 HECTOR CT. APT.7  
City-St-Zip: ORLANDO, FL 32822

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: OM (X) Change ( ) Addition  
Name: JONES, JONTAE N  
Address: 1606 WOOD VIOLET DR.  
City-St-Zip: ORLANDO, FL 32824

Title: FA ( ) Change (X) Addition  
Name: FERGUSON, MONICA  
Address: 5549 OXFORD MOORE  
City-St-Zip: WINDEMERE, FL 34786

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: SANDRA WALKER

P

01/05/2008

Electronic Signature of Signing Officer or Director

Date