

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011697

FILED
Sep 11, 2007
Secretary of State

Entity Name: WINGS FOR YOUNG WOMEN FOUNDATION, INC.

Current Principal Place of Business:

634 WESTMINSTER BOULEVARD
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

634 WESTMINSTER BOULEVARD
OLDSMAR, FL 34677

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

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: VAPORIS, NIKKI
Address: 634 WESTMINSTER BOULEVARD
City-St-Zip: OLDSMAR, FL 34677

Title: VD () Delete
Name: LOGUE, ELIZABETH
Address: 634 WESTMINSTER BOULEVARD
City-St-Zip: OLDSMAR, FL 34677

Title: D () Delete
Name: HOGAN, RHONDA
Address: 634 WESTMINSTER BOULEVARD
City-St-Zip: OLDSMAR, FL 34677

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

Title: D () Change (X) Addition
Name: TAYLOR, SHANA
Address: 634 WESTMINSTER BLVD.
City-St-Zip: OLDSMAR, FL 34677

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: NIKKI VAPORIS

PD

09/11/2007

Electronic Signature of Signing Officer or Director

Date