## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000012256

Entity Name: C.A.R.E. FOR WOMEN FOUNDATION, INC.

FILED Apr 12, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

204 E SOUTH STREET APT 2062 4245 ENDERS ST ORLANDO, FL 32801

201

ORLANDO, FL 32814

**Current Mailing Address: New Mailing Address:** 

204 E SOUTH STREET APT 2062 P.O.BOX 4546

ORLANDO, FL 32801 ORLANDO, FL 32802

FEI Number: 74-3196577 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MCARTHY, CATHERINE E MCARTHY, CATHERINE E 204 E SOUTH STREET APT 2062 4245 ENDERS ST

ORLANDO, FL 32801 201 ORLANDO, FL 32814 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: CATHERINE ELIZABETH MCCARTHY 04/12/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete MCCARTHY, CATHERINE E MCCARTHY, CATHERINE E Name: Name: 204 E SOUTH STREET APT 2062 Address: 4245 ENDERS ST APT 201 Address: ORLANDO, FL 32814 City-St-Zip: ORLANDO, FL 32801 City-St-Zip:

Title: ( ) Delete Title: () Change () Addition

Name: CARTER, GLEN E Name: Address: 4437 BRIDGEWATER DRIVE Address: City-St-Zip: ORLANDO, FL 32817 City-St-Zip:

Title: () Delete Title: () Change () Addition

BLUCHER, KELLY Name: Name: 4201 FORRESTAL AVE Address: Address: City-St-Zip: ORLANDO, FL 32806 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: CATHERINE ELIZABETH MCCARTHY CEO 04/12/2009