2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2009
Secretary of State

DOCUMENT# N07000002582

Entity Name: WOMEN IN JAZZ SOUTH FLORIDA, INC.

Current Principal Place of Business:

2801 S. OAKLAND FOREST DR, SUITE 103
OAKLAND PARK, FL 33309

New Principal Place of Business:

Current Mailing Address:

2801 S. OAKLAND FOREST DR, SUITE 103
OAKLAND PARK, FL 33309

New Mailing Address:

FEI Number: 20-8656432 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARTWRIGHT, JOAN
2801 S. OAKLAND FOREST DR, SUITE 103
OAKLAND PARK, FL 33309 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:	EXD	( ) Delete
Name:	CARTWRIGHT, JOAN	
Address:	2801 S. OAKLAND FOREST DR, SUITE 103	
City-St-Zip:	OAKLAND PARK, FL 33309	
Title:	P	( ) Delete
Name:	BLACK, KAREN	
Address:	5440 N STATE RD 7 SUITE 220	
City-St-Zip:	NORTH LAUDERDALE, FL 33319	
Title:	S	( ) Delete
Name:	NOBLES, SANDRA	
Address:	431 NW 48TH TERRACE	
City-St-Zip:	PLANTATION, FL 33313	
Title:	T	( ) Delete
Name:	BOURSIQUOT, JANICE DR.	
Address:	1179 NW 78TH WAY	
City-St-Zip:	PLANTATION, FL 33322	

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:	( ) 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: JOAN CARTWRIGHT DIR 04/09/2009

Electronic Signature of Signing Officer or Director — Date