2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2009
Secretary of State

DOCUMENT# N07000009115

Entity Name: FLORIDA FEDERATION OF REPUBLICAN WOMEN, INC.

Current Principal Place of Business:

4911 NE 27TH TERRACE
LIGHTHOUSE POINT, FL 33064

New Principal Place of Business:

Current Mailing Address:

4911 NE 27TH TERRACE
LIGHTHOUSE POINT, FL 33064

New Mailing Address:

FEI Number: 20-5038883 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOMEZ-MALLADA, ANA
320 WEST OAKLAND PARK BLVD
FORT LAUDERDALE, FL 33311 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: DP ( ) Delete
Name: IVELL, LINDA
Address: 5630 EMERALD RIDGE BOULEVARD
City-St-Zip: LAKELAND, FL 33813

Title: DVP ( ) Delete
Name: GRAVES, CINDY
Address: 7272 SAN LUCAS ROAD
City-St-Zip: JACKSONVILLE, FL 32217

Title: DS ( ) Delete
Name: MALLADA, ANA G
Address: 4911 NE 27 TERR.
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: DT ( ) Delete
Name: PERRI, PATRICIA
Address: 869 THE MASTERS BOULEVARD
City-St-Zip: SHALIMAR, FL 32579

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: DT (X) Change ( ) Addition
Name: LOVING, SUZANNE
Address: 4619 HARBOUR NORTH CT
City-St-Zip: JACKSONVILLE, FL 32225

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: SUZANNE LOVING DT 03/22/2009

Electronic Signature of Signing Officer or Director — Date