## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000010822

FILED Jan 13, 2009 Secretary of State

Entity Name: WOMEN'S FELLOWSHIP MINISTRIES, INC.

Current P	rincipal Place	of Business:	New Principal Plac	e of Business:	
	DICKS CIRCLE HAVEN, FL 338	84			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	DICKS CIRCLE HAVEN, FL 338	84			
FEI Number	: 77-0701395	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
525 REDE	SON, DANIELL DICKS CIRCLE HAVEN, FL 338				
	e named entity s e of Florida.	ubmits this statement for the pu	urpose of changing its registe	red office or registered agent, or both,	
SIGNATU	RE:				
	Electroni	c Signature of Registered Age	nt	Date	
OFFICER	Electroni S AND DIRECT			Date  GES TO OFFICERS AND DIRECTORS	
Fitle: Name: Address:	S AND DIRECT	ORS: Delete A L CIRCLE			
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	PD () TAYLOR, VERN 525 REDDICKS WINTER HAVEN	CIRCLE , FL 33884  Delete DANIELLE S CIRCLE	ADDITIONS/CHANGE Title: Name: Address:	GES TO OFFICERS AND DIRECTOR	
Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Address:	PD () TAYLOR, VERNA 525 REDDICKS WINTER HAVEN  VPD () RICHARDSON, I 525 REDDICKS WINTER HAVEN	CIRCLE Delete DANIELLE S CIRCLE , FL 33884  Delete DANIELLE S CIRCLE , FL 33884  Delete TIS J JR ALFRED RD.	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTOR:  ( ) Change ( ) Addition	
OFFICER  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:  City-St-Zip:  City-St-Zip:  City-St-Zip:	PD () TAYLOR, VERNO 525 REDDICKS WINTER HAVEN  VPD () RICHARDSON, I 525 REDDICKS WINTER HAVEN  D () JOHNSON, CUR 1019 OLD LAKE AUBURNDALE, I	CORS:  Delete A L CIRCLE , FL 33884  Delete DANIELLE S CIRCLE , FL 33884  Delete TIS J JR ALFRED RD. FL 33823  Delete KEITH E LANE	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address:	GES TO OFFICERS AND DIRECTORS  ( ) Change ( ) Addition  ( ) Change ( ) Addition	

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: DANIELLE RICHARDSON VPD 01/13/2009