

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003687

FILED
Apr 30, 2009
Secretary of State

Entity Name: EAST FLORIDA CHAPTER OF UNIFEM/USA INC.

Current Principal Place of Business:

1718 SOUTH DOUGLAS ST.
LAKE WORTH, FL 33460

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 22472
WEST PALM BEACH, FL 33416

New Mailing Address:

P.O. BOX 22477
WEST PALM BEACH, FL 33416

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DURANDISSE, REGINALE
1718 SOUTH DOUGLAS ST.
LAKE WORTH, FL 33460 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: P () Delete
Name: VANMEEK, LUZ
Address: P.O. BOX 22472
City-St-Zip: WEST PALM BEACH, FL 33416

Title: VP () Delete
Name: JACKSON, NERISSA
Address: P.O. BOX 22472
City-St-Zip: WEST PALM BEACH, FL 33416

Title: SEC () Delete
Name: SADDLER, PEARL
Address: P.O. BOX 22472
City-St-Zip: WEST PALM BEACH, FL 33416

Title: D (X) Delete
Name: ANDREWS, SARKA
Address: P.O. BOX 22472
City-St-Zip: WEST PALM BEACH, FL 33416

Title: D (X) Delete
Name: DURANDISSE, REGINALE
Address: P.O. BOX 22472
City-St-Zip: WEST PALM BEACH, FL 33416

Title: D (X) Delete
Name: MOHAMUD, FARTUN
Address: P.O. BOX 22472
City-St-Zip: WEST PALM BEACH, FL 33416

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VANMEEK, LUZ
Address: P.O. BOX 22477
City-St-Zip: WEST PALM BEACH, FL 33416

Title: VP (X) Change () Addition
Name: DURANDISSE, REGINALE
Address: P.O. BOX 22477
City-St-Zip: WEST PALM BEACH, FL 33416

Title: D (X) Change () Addition
Name: ANDREWS, SARKA
Address: P.O. BOX 22477
City-St-Zip: WEST PALM BEACH, FL 33416

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: REGINALE DURANDISSE

VP

04/30/2009

Electronic Signature of Signing Officer or Director

Date