## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N08000009462

FILED Aug 21, 2009 Secretary of State

Entity Name: A NEW DAY FOR WOMEN AND CHILDREN, INC.

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

914 ALMOND TREE CIRCLE 1220 CREEKBOTTOM CIRCLE

ORLANDO, FL 32835 ORLANDO, FL 32825

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

914 ALMOND TREE CIRCLE 1220 CREEKBOTTOM CIRCLE

ORLANDO, FL 32835 ORLANDO, FL 32825

FEI Number: 26-3477439 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BOWMAN, STEPHANIE DENINO, ANNA MARIE 914 ALMOND TREE CIRCLE 1220 CREEKBOTTOM CIRCLE ORLANDO, FL 32835 ORLANDO, FL 32825

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: YVONNE TRAFTON 08/21/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition BOWMAN, STEPHANIE DENINO, ANNA MARIE Name: Name: 914 ALMOND TREE CIRCLE Address: 1220 CREEKBOTTOM CIRCLE Address:

City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32825

Title: () Delete Title: (X) Change ( ) Addition Name: DENINO, ANNA MARIE Name: JOHNSON, KIM

Address: 1220 CREEKBOTTOM CIRCLE Address: 500 SAGECREEK COURT

City-St-Zip: ORLANDO, FL 32825 City-St-Zip: WINTER SPRINGS, FL 32708

Title: () Delete Title: (X) Change ( ) Addition TRAFTON, YVONNE JOHNSON, KIM Name: Name:

500 SAGECREEK COURT 1429 OAK SPRINGS PLACE Address: Address: City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: LAKE MARY, FL 32746

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: ANNAMARIE DENINO PD 08/21/2009