

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 17, 2009
Secretary of State

DOCUMENT# N08000011432

Entity Name: PROFESSIONAL WOMEN IN CONSTRUCTION, INC.**Current Principal Place of Business:**8230 NW 16TH STREET
PEMBROKE PINES, FL 33024**New Principal Place of Business:****Current Mailing Address:**8230 NW 16TH STREET
PEMBROKE PINES, FL 33024**New Mailing Address:**P.O. BOX 291558
DAVIE, FL 33329**FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**STRAUB, CHARLES ESQ
DERREVERE, HAWKES & BLACK
470 COLUMBIA DRIVE
WEST PALM BEACH, FL 33409 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: SLANO, RHONDIA
Address: 204 EVERGRENE PARKWAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VP () Delete
Name: VARON, MARIE
Address: 8230 NW 18TH STREET
City-St-Zip: PEMBROKE PINES, FL 33024

Title: T () Delete
Name: PAVILK, CHERI
Address: 2200 CENTREPARK WEST DRIVE, SUITE 100
City-St-Zip: WEST PALM BEACH, FL 33409

Title: S () Delete
Name: WALTON, KIRA
Address: 80 SW 8TH STREET, SUITE 1800
City-St-Zip: MIAMI, FL 33130

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SIANO, RHONDIA B
Address: 204 EVERGRENE PARKWAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VP (X) Change () Addition
Name: VARON, MARIE
Address: 8230 NW 16TH STREET
City-St-Zip: PEMBROKE PINES, FL 33024

Title: T (X) Change () Addition
Name: WALTON, KIRA
Address: 401 E. LAS OLAS BLVD. #130-103
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: S (X) Change () Addition
Name: KIDDER, KRISTINA
Address: 117 GRANADA STREET
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: RHONDIA B. SIANO

P

09/17/2009

Electronic Signature of Signing Officer or Director

Date