

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 19, 2008 08:00 AM
Secretary of State

DOCUMENT # N08615

1. Entity Name

WOMEN'S ENERGY BANK, INCORPORATED



Principal Place of Business

**5475 14TH AVENUE N
SAINT PETERSBURG FL 33710
US**

Mailing Address

**P.O. BOX 15548
ST PETERSBURG FL 33733-5548**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-2597466

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DITTO, PATRICIA M
5475 14TH AVENUE NORTH
SAINT PETERSBURG FL 33710**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when re-appointing)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **DAVIS, ANN C**
CITY-STATE-ZIP **6061 2ND ST. E #42
SAINT PETERSBURG BEACH FL 33706**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **BECKMAN, BETTY**
CITY-STATE-ZIP **1225 58TH ST N #101A
SAINT PETERSBURG FL 33710**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **DITTO, PATRICIA**
CITY-STATE-ZIP **5475 14TH AVENUE N
SAINT PETERSBURG FL 33710**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **FINEGAN, PATRICIA**
CITY-STATE-ZIP **6061 SECOND ST E #56
ST PETE BEACH FL 33706**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition

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CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Patricia M. Ditto

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May 2008

727-323-5706