## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08615

FILED Apr 05, 2009 Secretary of State

Entity Name: WOMEN'S ENERGY BANK, INCORPORATED

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	I AVENUE N TERSBURG, FL 33710 US			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
P.O. BOX ST PETER	15548 SBURG, FL 337335548			
FEI Number:	59-2597466 FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of Current Registered Agent:	Name and Address o	f New Registered Agent:	
	TRICIA M I AVENUE NORTH TERSBURG, FL 33710 US			
	named entity submits this statement for the performance of Florida.	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUF	RE:			
	Electronic Signature of Registered Age	ent	Date	
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( ) Delete DAVIS, ANN C 6061 2ND ST. E #42 SAINT PETERSBURG BEACH, FL 33706	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete BECKMAN, BETTY 1225 58TH ST N #101A SAINT PETERSBURG, FL 33710	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete DITTO, PATRICIA 5475 14TH AVENUE N SAINT PETERSBURG, FL 33710	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete FINEGAN, PATRICIA 6061 SECOND ST E #56 ST PETE BEACH, FL 33706	Title: Name: Address: City-St-Zip:	( ) 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: PATRICIA DITTO RA 04/05/2009