

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 14, 2010
Secretary of State

DOCUMENT# N09000000726

Entity Name: WOMEN-INMOTION INC.

Current Principal Place of Business:822 POLK STREET
ORLANDO, FL 32805**New Principal Place of Business:****Current Mailing Address:**P.O BOX 551306
ORLANDO, FL 32855**New Mailing Address:**

FEI Number: 26-4107362

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:ROBERTS, SHERRY-ANN
822 POLK STREET
ORLANDO, FL 32805 US**Name and Address of New Registered Agent:**ROBERTS, SHERRY-ANN
2550 N. ALAFAYA TRAIL
ORLANDO, FL 32826 US

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: SHERRY-ANN ROBERTS

06/14/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: ROBERTS, SHERRY-ANN MISS.
Address: P.O BOX 551306
City-St-Zip: ORLANDO, FL 32855

Title: V.P
Name: TASTET-ORTIZ, KAIDI O MRS.
Address: P.O BOX 551306
City-St-Zip: ORLANDO, FL 32855

Title: OM
Name: MORRIS, SHERRIE MRS.
Address: P.O BOX 551306
City-St-Zip: ORLANDO, FL 32855

Title: SEC
Name: ABOUO, SANDRA A MISS.
Address: P.O BOX 551306
City-St-Zip: ORLANDO, FL 32855

Title: TRE
Name: DAYS, DIANA MISS.
Address: P.O BOX 551306
City-St-Zip: ORLANDO, FL 32855

I hereby 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 all other like empowered.

SIGNATURE: SHERRY-ANN ROBERTS

P

06/14/2010

Electronic Signature of Signing Officer or Director

Date