2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000726

Entity Name: WOMEN-INMOTION INC.

FILED Apr 13, 2011 Secretary of State

Current Principal Place of Business:

New Principal Place of Business:

822 POLK STREET ORLANDO, FL 32805

Current Mailing Address: New Mailing Address:

P.O. BOX 5657 WINTER PARK, FL 32792

FEI Number: 26-4107362 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ROBERTS, SHERRY-ANN
2550 N. ALAFAYA TRAIL
ORLANDO, FL 32826 US
ROBERTS, SHERRY-ANN
258 SCOTTSDALE SQUARE
WINTER PARK, FL 32792 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 04/13/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: PRES

Name: ROBERTS, SHERRY-ANN MISS.

Address: P.O BOX 5657

City-St-Zip: WINTER PARK, FL 32792

Title: V.P

Name: TASTET-ORTIZ, KAIDI O MRS.

Address: P.O BOX 5657

City-St-Zip: WINTER PARK, FL 32792

Title: OM

Name: MORRIS, SHERRIE MRS.

Address: P.O BOX 5657

City-St-Zip: WINTER PARK, FL 32792

Title: SEC

Name: FRANCOIS, MIRLANDE A MISS.

Address: P.O BOX 5657

City-St-Zip: WINTER PARK, FL 32792

Title: TRE

Name: DAYS, DIANA MISS. Address: P.O BOX 5657

City-St-Zip: WINTER PARK, FL 32792

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 PRES 04/13/2011