2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09070

FILED Feb 05, 2007 Secretary of State

Entity Name: WOMENS WORLD INVITATIONAL FLY CHAMPIONSHIP, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
2.O. BOX 1757 SLAMORADA, FL 33036		TARPON FLATS - U	81250 OVERSEAS HIGHWAY TARPON FLATS - UNIT # 2 ISLAMORADA, FL 33036 New Mailing Address:		
ırrent Mailing Address:					New Mailing Addre
O. BOX LAMOR/	1757 ADA, FL 33036				
l Number	: 59-2445429	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
ame and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
ARPON I	ERSEAS HIGHV FLATS UNIT# 2 ADA, FL 33036				
	named entity s	ubmits this statement for the	nurnose of changing its register	red office or registered agent, or both	
e above	e named entity si e of Florida.	ubmits this statement for the	purpose of changing its register	red office or registered agent, or both,	
ne above	e of Florida.	ubmits this statement for the	purpose of changing its register	red office or registered agent, or both,	
ne above the State	e of Florida. RE:	ubmits this statement for the		red office or registered agent, or both, Date	
ne above the State GNATUI	e of Florida. RE:	c Signature of Registered Ag	ent		
e above the State GNATUI	e of Florida. RE: Electroni S AND DIRECT	c Signature of Registered Ag F ORS: Delete	ent	Date	
e above the State GNATUI FFICER: e: me: dress:	e of Florida. RE: Electroni S AND DIRECT P/D ()I MORET, SUE P.O.BOX 1757 ISLAMORADA, F	c Signature of Registered Ag ORS: Delete L 33036 Delete IA	ent ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR	
e above the State GNATUI FICER: e: ne: tress:St-Zip: e: ne: tress:	e of Florida. RE: Electroni S AND DIRECT P/D ()I MORET, SUE P.O.BOX 1757 ISLAMORADA, F VP/D ()I RUDOLPH, DIAN P.O. BOX 612 ISLAMORADA, F S/D ()I DUCAN, LESLIE	c Signature of Registered Ag FORS: Delete L 33036 Delete L 33036 Delete AS HIGHWAY - UNIT #3	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR () Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: SUE MORET PRES 02/05/2007