

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09886

FILED
Mar 24, 2009
Secretary of State

Entity Name: WOMEN FOR CHRIST, INC.

Current Principal Place of Business:

1871 MONTGOMERY PLACE
JACKSONVILLE, FL 32205 US

New Principal Place of Business:

1025 MAPLE LANE
JACKSONVILLE, FL 32207 US

Current Mailing Address:

P.O. BOX 60132
JACKSONVILLE, FL 32236 US

New Mailing Address:

FEI Number: 59-2605319 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAWKINS, ANNE R
1871 MONTGOMERY PLACE
JACKSONVILLE, FL 32205 US

Name and Address of New Registered Agent:

LANGLEY, ELIZABETH H
1025 MAPLE LANE
JACKSONVILLE, FL 32207 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: ELIZABETH H. LANGLEY

03/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HUGHES, CHARLENE
Address: 4265 YACHT CLUB RD
City-St-Zip: JACKSONVILLE, FL 32210

Title: VP () Delete
Name: HONEYCUTT, SUZANNE
Address: 3645 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP () Delete
Name: RHYNE, MUFFETT
Address: 4321 APALACHEE ST.
City-St-Zip: JACKSONVILLE, FL 32210

Title: T () Delete
Name: HAWKINS, ANNE R
Address: 1871 MONTGOMERY PL
City-St-Zip: JACKSONVILLE, FL 32205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RHYNE, MUFFETT
Address: 4321 APALACHEE ST,
City-St-Zip: JACKSONVILLE, FL 32210

Title: P (X) Change () Addition
Name: HONEYCUTT, SUZANNE
Address: 3645 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32207

Title: T (X) Change () Addition
Name: LANGLEY, ELIZABETH H
Address: 1025 MAPLE LANE
City-St-Zip: JACKSONVILLE, FL 32207

Title: S (X) Change () Addition
Name: HAWKINS, ANNE R
Address: 1871 MONTGOMERY PL
City-St-Zip: JACKSONVILLE, FL 32205

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: ELIZABETH H. LANGLEY

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03/24/2009

Electronic Signature of Signing Officer or Director

Date