


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # N16809 1. Entity Name EXECUTIVE WOMEN OUTREACH, INC.	
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Principal Place of Business 1281 N OCEAN DRIVE RIVIERA BEACH, FL 33404	Mailing Address P.O. BOX 7476 WEST PALM BEACH, FL 33405
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DO NOT WRITE IN THIS SPACE



04252008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2703382	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

SPENCER, VIRGINIA
2725 PGA BOULEVARD
PALM BEACH GARDENS, FL 33410

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when nonstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD ELDEN, JOYCE 222 LAKEVIEW AVENUE, STE. 400 WEST PALM BEACH, FL 33401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCS PELTON, CHARLOTTE L 477 ROSEMARY AVENUE, STE. 316 WEST PALM BEACH, FL 33401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DELONG, MICHELE GURTO CPA 505 S. FLAGLER DRIVE, #220 WEST PALM BEACH, FL 33401
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05/27/08-80072-011 61.25

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joyce L. Elden Chair 4/26/08 (561) 671-3604

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #