2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22634

FILED Apr 29, 2008 Secretary of State

Entity Name: THE WOMEN'S COMMITTEE, INC.

Current Principal Place of Business: New Principal Place of Business:

BIG BROTHERS/BIG SISTER & MENTORING RES. 701 S.W. 27TH AVENUE, STE. 800

MIAMI, FL 33135

Current Mailing Address: New Mailing Address:

BIG BROTHERS/BIG SISTER & MENTORING RES. 701 S.W. 27TH AVENUE, STE. 800 MIAMI, FL 33135

FEI Number: 59-2851792 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MUNIZ, LYDIA I 700 SW 27TH AVE. 800 MIAMI, FL 33135 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition Name:

DALEY, JILL NOSICH, HEIDI Name: 1441 BELLA VISTA AVENUE Address: 4501 SAN AMARO DRIVE Address: City-St-Zip: CORAL GABLES, FL 33155 City-St-Zip: CORAL GABLES, FL 33146

Title: Title: () Delete () Change () Addition

TOBER, ADRIENNE Name: Name: Address: 1420 W 22ND STREET Address: City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip:

Title: **RSEC** () Delete Title: RSEC (X) Change () Addition

NOSICH, HEIDI MILLER, BRONWYN Name: Name: 4501 SAN AMARO DRIVE Address: Address: 3213 MATILDA STREET City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip: COCONUT GROVE, FL 33133

Title: TREA () Delete Title: TREA (X) Change () Addition

TENN, LISA Name: Name: BAUMAN, ELEANOR

Address: 8940 SW 176TH ST Address: 1800 NE 114TH STREET APT 1504

City-St-Zip: MIAMI, FL 33157 City-St-Zip: MIAMI, FL 33181

Title: () Delete Title: (X) Change () Addition

ROSEN, MICHELE SALAZAR, MIRIAM Name: Name:

3598 YACHT CLUB DRIVE, APT. 602 7290 SW 60TH ST Address: Address:

City-St-Zip: MIAMI, FL 33143 City-St-Zip: AVENTURA, FL 33180

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: LYDIA I MUNIZ DIR 04/29/2008