2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33023

FILED Feb 19, 2009 Secretary of State

Entity Name: WOMEN'S COMMITTEE, FIGHT AGAINST HUNGER, INC.

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

535 N. UNIVERSITY DR. 5421 SW 94TH. AVENUE PLANTATION, FL 33324 US COOPER CITY, FL 33328 US

Current Mailing Address: New Mailing Address:

535 N. UNIVERSITY DR. 5421 SW 94TH. AVENUE PLANTATION, FL 33324 US COOPER CITY, FL 33328 US

FEI Number: 65-0134598 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:

CHUECA, TERESA A TD
535 N. UNIVERSITY DR.
PLANTATION, FL 33324 US
DOLCATER, ADELA TD
5421 SW 94TH. AVENUE
COOPER CITY, FL 33328 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: ADELA DOLCATER 02/19/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name:FAY, ALICE PDName:ARBULU, LAURA PDAddress:4750 NE AVE.Address:6265 HAKES BLUFF

City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: DAVIE, FL 33331

Title: VD () Delete Title: VD (X) Change () Addition Name: PRUITT, LUZ VD Name: ARANGO, MARINA VD

 Address:
 5180 SW 89 AVE.
 Address:
 477 LAKEVIEW BLDG 98 DEPT 2

 City-St-Zip:
 COOPER CITY, FL 33308
 City-St-Zip:
 WESTON, FL 33326

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

 Name:
 TERESA, CHUECA A TD
 Name:
 DOLCATER, ADELA TD

 Address:
 535 N. UNIVERSITY DR.
 Address:
 5421 SW 94TH. AVE

 City-St-Zip:
 PLANTATION, FL 33324
 City-St-Zip:
 COOPER CITY, FL 33328

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: LAURA ARBULU PD 02/19/2009