

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000464

FILED  
Jan 04, 2008  
Secretary of State

Entity Name: WOMEN'S FUND OF MIAMI-DADE COUNTY, INC.

## Current Principal Place of Business:

2650 SW 27 AVENUE  
SUITE 303  
MIAMI, FL 33133 US

## New Principal Place of Business:

## Current Mailing Address:

2650 SW 27 AVENUE  
SUITE 303  
MIAMI, FL 33133 US

## New Mailing Address:

FEI Number: 65-0436923      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GERALD H HOULIHAN, ESQ  
504 ARAGON  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

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:

Title: PRE ( ) Delete  
Name: SHISHKO, ELLEN  
Address: 12401 SW 68TH COURT  
City-St-Zip: MIAMI, FL 33156

Title: D ( ) Delete  
Name: SMITH, RONDA  
Address: 90 ALTON ROAD, SUITE 2509  
City-St-Zip: MIAMI BEACH, FL 33149

Title: D ( ) Delete  
Name: WINKLE, BETTY  
Address: 8310 SW 62ND COURT  
City-St-Zip: MIAMI, FL 33143

Title: D ( ) Delete  
Name: MCKENNA, JOY  
Address: 901 PONCE DE LEON BLVD. SUITE 505  
City-St-Zip: MIAMI, FL 33134

Title: D ( ) Delete  
Name: PEREZ, NANCY  
Address: 7241 SW 168 STREET, SUITE C  
City-St-Zip: MIAMI, FL 33157

Title: D (X) Delete  
Name: KITCHENS, CLAUDIA  
Address: 2732 SEGOVIA STREET  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHAI (X) Change ( ) Addition  
Name: WEINKLE, BETTY  
Address: 8310 SW 62ND COURT  
City-St-Zip: MIAMI, FL 33143

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TREA (X) Change ( ) Addition  
Name: MCKENNA, JOY  
Address: 901 PONCE DE LEON BLVD., SUITE 505  
City-St-Zip: CORAL GABLES, FL 33134

Title: ED (X) Change ( ) Addition  
Name: CLAUDIA, KITCHENS  
Address: 2650 SW 27 AVENUE # 303  
City-St-Zip: MIAMI, FL 33133

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: BETTY WEINKLE

CHAI

01/04/2008

Electronic Signature of Signing Officer or Director

Date