2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400000595

FILED May 10, 2006 Secretary of State

Entity Name: CENTRAL FLORIDA CHAPTER-INTERNATIONAL BLACK WOMEN'S CONGRESS, INCORPORATED

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

250 WILSHIRE BLVD 250 WILSHIRE BLVD

STE 175 STE 175

CASSELBERRY, FL 32707 CASSELBERRY, FL 32707 US

Current Mailing Address: New Mailing Address:

250 WILSHIRE BLVD 250 WILSHIRE BLVD

STE 175 STE 175

CASSELBERRY, FL 32707 CASSELBERRY, FL 32707 US

FEI Number: 59-3305148 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MILLER, REGENIA S 250 WILSHIRE BLVD SUITE 175 CASSELBERRY, FL 32707 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:

Title: PD () Delete Title: PD (X) Change () Addition Name: MILLER, REGENIA S Name: MILLER, REGENIA S

 Address:
 917 WAYBOURNE WAY
 Address:
 917 WAYBOURNE WAY

 City-St-Zip:
 LAKE MARY, FL 32746
 City-St-Zip:
 LAKE MARY, FL 32746 US

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

 Name:
 TALBOTT, BEVERLY
 Name:
 TALBOTT, BEVERLY

 Address:
 1449 MT. LAUREL DRIVE
 Address:
 1449 MT. LAUREL DRIVE

 City-St-Zip:
 WINTER SPRINGS, FL 32708
 City-St-Zip:
 WINTER SPRINGS, FL 32708 US

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

 Name:
 MCCORD, LAQUANDA
 Name:
 MCCORD, LAQUANDA

 Address:
 2824 COTTONDALE DRIVE
 Address:
 2824 COTTONDALE DRIVE

 City-St-Zip:
 DELTONA, FL 32738
 City-St-Zip:
 DELTONA, FL 32738 US

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

 Name:
 ANDERSON, CONSTANCE
 Name:

 Address:
 2480 CRAWFORD DRIVE
 Address:

 City-St-Zip:
 SANFORD, FL 32771 FL
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: REGENIA S. MILLER PD 05/10/2006