2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2009
Secretary of State

DOCUMENT# N94000002031

Entity Name: NATIONAL WOMEN'S POLITICAL CAUCUS GWEN CHERRY CHAPTER, INC.

Current Principal Place of Business:

6411 NW 58TH ST
TAMARAC, FL 33321 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1234
POMPANO BEACH, FL 33061 US

New Mailing Address:

PO BOX 1234
POMPANO BEACH, FL 330611234 US

FEI Number: 59-2145815 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LYNN, PATTI
6411 NW 58TH STREET
FORT LAUDERDALE, FL 333215722 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:	P	( ) Delete
Name:	MARTINEZ, NADEZDA	
Address:	7188 NW 49TH PL	
City-St-Zip:	LAUDERHILL, FL 33319	
Title:	D	( ) Delete
Name:	ARMBRISTER, HAZEL	
Address:	1808 NE 6TH AVE	
City-St-Zip:	POMPANO BEACH, FL 33060	
Title:	D	( ) Delete
Name:	HOSTO, KAREN	
Address:	161 SE 13 ST	
City-St-Zip:	POMPANO BEACH, FL 33060	
Title:	VP	( ) Delete
Name:	WILLIAMSON, BARBARA	
Address:	2952 NW 13TH ST.	
City-St-Zip:	FORT LAUDERDALE, FL 33311	
Title:	T	( ) Delete
Name:	LYNN, PATTI	
Address:	6411 NW 58 STREET	
City-St-Zip:	TAMARAC, FL 333215722	
Title:	D	( ) Delete
Name:	LYNCH, RUTH	
Address:	2060 NW 48TH TERR #207	
City-St-Zip:	LAUDERHILL, FL 33313	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	D	(X) Change ( ) Addition
Name:	MARTINEZ, NADEZDA	
Address:	7188 NW 49TH PL	
City-St-Zip:	LAUDERHILL, FL 33319	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	P	(X) Change ( ) Addition
Name:	WILLIAMSON, BARBARA	
Address:	2952 NW 13TH ST.	
City-St-Zip:	FORT LAUDERDALE, FL 33311	
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: PATTI LYNN TREA 03/02/2009

Electronic Signature of Signing Officer or Director — Date