2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2010
Secretary of State

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Entity Name: WOMEN FOR HOSPICE, INC.

Current Principal Place of Business:

315 NORTH DONNELLY STREET
MOUNT DORA, FL 32757

New Principal Place of Business:

Current Mailing Address:

P O BOX 1741
MOUNT DORA, FL 32756 US

New Mailing Address:

FEI Number: 59-3106735 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEARSON, ERMYNE
815 N MCDONALD ST
MOUNT DORA, FL 32757 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: SD
Name: ROBERTS, SUZIE
Address: P.O. BOX 1741
City-St-Zip: MOUNT DORA, FL 32756

Title: VD
Name: CLEMENTS, MARJ
Address: P.O. BOX 1741 (N/A)
City-St-Zip: MT. DORA, FL 32756

Title: T
Name: BUSH, BRENDA J
Address: 100 S TREMAIN ST A-1
City-St-Zip: MOUNT DORA, FL 32757

I hereby 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 all other like empowered.

SIGNATURE: BRENDA J. BUSH T 01/11/2010

Electronic Signature of Signing Officer or Director Date