2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2009
Secretary of State

DOCUMENT# N96000003580

Entity Name: WOMEN WITH A VISION, INC.

Current Principal Place of Business:

18801 W DIXIE HWY
NO MIAMI BEACH, FL 33180

New Principal Place of Business:

Current Mailing Address:

18801 W DIXIE HWY
NO MIAMI BEACH, FL 33180

New Mailing Address:

FEI Number: 59-2350076 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAMB, CECIL
18801 W DIXIE HWY
NO MIAMI BEACH, FL 33180 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: DP ( ) Delete
Name: LAMB, CECIL
Address: 18801 W DIXIE HWY
City-St-Zip: NO MIAMI BEACH, FL 33180

Title: VP ( ) Delete
Name: POPE, CAMELON
Address: 18801 W DIXIE HWY
City-St-Zip: NO MIAMI BEACH, FL 33180

Title: D ( ) Delete
Name: HALLMON, ALTHEA
Address: 18801 W DIXIE HWY
City-St-Zip: NO MIAMI BEACH, FL 33180

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D ( ) Change (X) Addition
Name: KNOWLES, LINDA
Address: 18801 W DIXIE HWY
City-St-Zip: NO MIAMI BEACH, FL 33180

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: CECIL LAMB DP 03/11/2009

Electronic Signature of Signing Officer or Director — Date