

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006120

FILED  
Feb 16, 2010  
Secretary of State

**Entity Name:** THE SALESIAN WOMEN ASSOCIATION, INC.

**Current Principal Place of Business:**

9737 NW 41 ST PMB106  
MIAMI, FL 33178 US

**New Principal Place of Business:**

**Current Mailing Address:**

9737 NW 41 ST PMB106  
MIAMI, FL 33178 US

**New Mailing Address:**

**FEI Number:** 91-1907813

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TOVAR, ILEANA ARIAS  
1725 MAIN STREET  
SUITE 209  
WESTON, FL 33326 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  
**Name:** LUCENA, CAROLINA  
**Address:** 2485 QUAIL ROOST DR.  
**City-St-Zip:** WESTON, FL 33327

**Title:** DVP  
**Name:** BASALO, ANA MARIA  
**Address:** 11130 NW 72ND TERR.  
**City-St-Zip:** DORAL, FL 33178

**Title:** DT  
**Name:** DUENAS, NORMA  
**Address:** 650 VALENCIA AV. #504  
**City-St-Zip:** CORAL GABLES, FL 33134

**Title:** D  
**Name:** MONROY, GRACIELA  
**Address:** 2657 NELSON CT.  
**City-St-Zip:** WESTON, FL 33332

**Title:** D  
**Name:** PENALOZA, CARMEN  
**Address:** 851 HAWTHORN TERR.  
**City-St-Zip:** WESTON, FL 33327

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:** CAROLINA LUCENA

DP

02/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date