

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003529

FILED  
Jul 03, 2005  
Secretary of State

Entity Name: WOMEN OF A CIRCLE, INC.

## Current Principal Place of Business:

108 EAST JEFFERSON ST.  
QUINCY, FL 32351

## New Principal Place of Business:

## Current Mailing Address:

205 SOUTH CHALK ST.  
QUINCY, FL 32351

## New Mailing Address:

FEI Number: 32-0112661      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:

ALBRITTON, RENELL W  
205 SOUTH CHALK ST  
QUINCY, FL 32351      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:

Title: S      ( ) Delete  
Name: BALM, PATRICIA  
Address: 935 SIKES ST.  
City-St-Zip: QUINCY, FL 32351

Title: T      ( ) Delete  
Name: ALBRITTON, RENELL  
Address: 205 SOUTH CHALK STREET  
City-St-Zip: QUINCY, FL 32351

Title: P      ( ) Delete  
Name: HILL, GLORIA  
Address: 108 EAST LAVARA ST.  
City-St-Zip: QUINCY, FL 32351

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S      (X) Change ( ) Addition  
Name: BAKER, PATRICIA  
Address: 935 SIKES ST.  
City-St-Zip: QUINCY, FL 32351

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 for the exemption stated in Section 119.07(3)(i), 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: RENELL ALBRITTON

T

07/03/2005

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

\_\_\_\_\_  
Date