2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006743

DUBOW, SHEILA

3809 NW 56 RD

BOCA RATON, FL 33496

Name:

Address:

City-St-Zip:

FILED Mar 21, 2009 Secretary of State

| Entity Nar | me: WOODFI | ELD WOMENS CLUB, INC. | | | |
|---|---|---------------------------------|---|--|--|
| Current P | rincipal Place | of Business: | New Principal Place | New Principal Place of Business: | |
| 3837 N.W. 56TH ROAD BOCA RATON, FL 33496 | | | | 3837 N.W.56TH ROAD BOCA RATON, FL 33496 | |
| Current M | ailing Addres | ss: | New Mailing Address | New Mailing Address: | |
| 4193 BRIARCLIFF CR BOCA RATON, FL 33496 | | | | 4193 BRIARCLIFF CIRCLE BOCA RATON, FL 33496 | |
| FEI Number: | : 65-0985647 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | Address of C | Current Registered Agent: | Name and Address o | f New Registered Agent: | |
| BOCA RAT | R CLIFF CIRC TON, FL 3349 named entity e of Florida. | 6 US | ourpose of changing its registered | d office or registered agent, or both, | |
| SIGNATUR | | nic Signature of Registered Age | ent | Date | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGI | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | T (RICH, MARILYI 4193 BRIARCL BOCA RATON, | IFF CIRCLE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | PD (SONDAK, AND 4266 NW 62NE BOCA RATON, |) RD | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: | TD (|) Delete | Title: | () Change () Addition | |

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARILYN RICH 03/21/2009 Τ