2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# N98000000324

Entity Name: CHRISTIAN WOMEN'S JOB CORPS OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1906 LEE RD
ORLANDO, FL 32810

New Principal Place of Business:

Current Mailing Address:

1906 LEE RD
ORLANDO, FL 32810

New Mailing Address:

FEI Number: 59-3530581 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LATHAM, P. LYNN
1906 LEE RD
ORLANDO, FL 32810 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:	D	( ) Delete
Name:	LATHAM, LYNN	
Address:	4502 LAKE MARTIN LANE #B	
City-St-Zip:	ORLANDO, FL 32808	
Title:	D	( ) Delete
Name:	SMITH, SANDY	
Address:	3698 SILVER LAKE LANE	
City-St-Zip:	KISSIMMEE, FL 34741	
Title:	D	( ) Delete
Name:	SMITH, DOT	
Address:	1120 DRUID	
City-St-Zip:	ORLANDO, FL 32751	
Title:	OD	( ) Delete
Name:	YATES, HELEN	
Address:	818 NORTH THOMPSON ROAD	
City-St-Zip:	APOPKA, FL 32712	

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

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: P. LYNN LATHAM AGEN 04/22/2009

Electronic Signature of Signing Officer or Director — Date