

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001732

FILED
May 01, 2006
Secretary of State

Entity Name: CHRISTIAN WOMEN'S JOB CORPORATION

Current Principal Place of Business:

100 NORTH LAKE AVENUE
AVON PARK, FL 33825

New Principal Place of Business:

Current Mailing Address:

120 SOUTH ANOKA AVENUE
AVON PARK, FL 33825

New Mailing Address:

FEI Number: 65-0961463 **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:

HALL, CAROL
100 N. LAKE AVE
AVON PARK, FL 33825 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: SD () Delete
Name: CHILDRESS, SHARON
Address: 360 GROVE STREET
City-St-Zip: AVON PARK, FL 33825

Title: D () Delete
Name: DONALDSON, DEVON P
Address: 1405 MISTY LAKE TERRACE
City-St-Zip: AVON PARK, FL 33825

Title: PD () Delete
Name: HALL, CAROL
Address: 217 NORTH VERONA AVENUE
City-St-Zip: AVON PARK, FL 33825

Title: D () Delete
Name: HECKARD, BETTY
Address: 405 SOUTH DELANEY AVENUE
City-St-Zip: AVON PARK, FL 33825

Title: D (X) Delete
Name: HOLLEY, RON
Address: 102 EAST PALMETTO STREET
City-St-Zip: AVON PARK, FL 33825

Title: TD () Delete
Name: J. DAVID LANGFORD,
Address: 3060 NORTH CAMBRIDGE ROAD
City-St-Zip: AVON PARK, FL 33825

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:

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 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: DEVON DONALDSON

T

05/01/2006

Electronic Signature of Signing Officer or Director

Date