2001 UNIFORM BUSINESS REPORT (UBR)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02-22-2001 90002 020 ****61.25

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DO NOT WRITE IN THIS SPACE

DOCUMENT # N99000005149

1. Entity Name

WOMEN WITH A MISSION, INC.

Principal Place of Business	Mailing Address
6460 SPRTINA JUPITER FL 33458	6460 SPRTINA JUPITER FL 33458

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0965843 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DOYLE, DESSIE
6460 SPRTINA
JUPITER FL 33458

7. Name and Address of New Registered Agent

Name Julie Dowler
Street 394 Norfolk Ave
Tequesta FL 33469
City Tequesta FL FL Zip Code 33469

8. 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 Dessie M. Doyle 2.15.01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PDD DOYLE, DESSIE 6460 SPARTINA CIR JUPITER FL 33458	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Dowler, Julie 394 Norfolk Ave Tequesta, FL 33469	☑ Change ☐ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD EARLEY, BRENDA J 201 TUMBLIN KLING RD FORT PIERCE FL 34982	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE President ZAIND, LYN 181 Beacon Lane Tequesta, FL 33469	☑ Change ☐ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S THOMAS, LORI 1932 CARIBBEAN COURT TEQUESTA FL 33469	☐ Delete D	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT DAVIDSON, KARIN 5600 N FLAGLER DR, 2305 WEST PALM BEACH FL 33407	☐ Delete D	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Julie Dowler REQUIRED 2.14.01 561.640.4000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

name changed and re-sent
4.2.01
Julie Dowler