

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000092106

FILED
Apr 29, 2003
Secretary of State

Entity Name: WOMEN OF VISION, INC.

Current Principal Place of Business:

5773 W. SUNRISE BLVD.
PLANTATION, FL 33322

New Principal Place of Business:

Current Mailing Address:

5773 W. SUNRISE BLVD.
PLANTATION, FL 33322

New Mailing Address:

FEI Number: 65-1044397

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPEAR, GARRY R
5455 N. FEDERAL HWY., STE. I
BOCA RATON, FL 33487 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: HOPWOOD, GAIL
Address: 3570 NW 95TH TERRACE
City-St-Zip: SUNRISE, FL 33351

Title: VP () Delete
Name: KILHEFNER, SARAH
Address: 9811 WESTVIEW DR #917
City-St-Zip: CORAL SPRINGS, FL 33076

Title: P () Delete
Name: ROCHET, FRANCES
Address: 851 E PLANTATION CIR
City-St-Zip: PLANTATION, FL 33342

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: KILHEFNER, SARAH
Address: 7611 NW 40TH CT
City-St-Zip: CORAL SPRINGS, FL 33065

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GAIL HOPWOOD

ST

04/29/2003

Electronic Signature of Signing Officer or Director

_____ Date