2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2006
Secretary of State

DOCUMENT# 751600

Entity Name: PLANNED PARENTHOOD OF SOUTH PALM BEACH AND BROWARD COUNTIES, INC.

Current Principal Place of Business:

455 NW 35TH STREET
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

455 NW 35TH STREET
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 59-1989443 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BURCH VIVIAN
455 NW 35TH STREET
BOCA RATON, FL 33431 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: DVC ( ) Delete
Name: BOYLE, JANET
Address: 455 NW 35 ST
City-St-Zip: BOCA RATON, FL 33431

Title: DC ( ) Delete
Name: BURCH, VIVIAN
Address: 455 NW 35 ST.
City-St-Zip: BOCA RATON, FL 33431

Title: DS ( ) Delete
Name: GROSS, JANE
Address: 455 NW 35 ST.
City-St-Zip: BOCA RATON, FL 33431

Title: P ( ) Delete
Name: CAPO BIANCO, MARY
Address: 455 NW 35 ST
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DC (X) Change ( ) Addition
Name: WITT, ROBIN
Address: 455 NW 35 ST.
City-St-Zip: BOCA RATON, FL 33431

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: MARY CAPOBIANCO CEO 01/03/2006
Electronic Signature of Signing Officer or Director — Date