

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR -5 PM 4:06

DOCUMENT # F94000000142 (9)

1. Corporation Name

NATIONAL ABORTION RIGHTS LEAGUE FOUNDATION, INC.

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

1156 - 15TH STREET NW, STE. 700
WASHINGTON DC 20005

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WASHINGTON DC 20005

3. Date Incorporated or Qualified

3a. Date of Last Report

01/10/1994

4. FBI Number

Applied For

52-1100361

Not Applicable

2. Principal Place of Business

2a. Mailing Address

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

22

27

City & State

City & State

7. Nonprofit with IRS 501(c)(3)

\$68.75 Supplemental
Fee Not Required

23

28

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1311 EXECUTIVE CENTER DR.
TALLAHASSEE FL 32301**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

CD

NAME

YOUNG, ALMA T

STREET ADDRESS

241 EAST 76TH STREET

CITY - ST - ZIP

NEW YORK NY 10021

1.1 TITLE

Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

TITLE

STD

NAME

LOVE, MARCENA W

STREET ADDRESS

1175 PELHAM RD.

CITY - ST - ZIP

WINNETKA IL 60093

2.1 TITLE

Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

TITLE

VCD

NAME

CROWE, IRENE W

STREET ADDRESS

3520 LELAND ST.

CITY - ST - ZIP

CHEVY CHASE MD 20815

3.1 TITLE

Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

TITLE

MB

NAME

MILLIKEN, HELEN

STREET ADDRESS

6103 PENINSULA DR.

CITY - ST - ZIP

TRAVERSE CITY MI 49684

4.1 TITLE

Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

TITLE

MB

NAME

PENCKE, CAROL T

STREET ADDRESS

5925 UPLAND TERRACE SO.

CITY - ST - ZIP

SEATTLE WA 98116

5.1 TITLE

Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

TITLE

MB

NAME

YAKE, STANLEY

STREET ADDRESS

10 FERRY DR.

CITY - ST - ZIP

REXFORD NY 12148

6.1 TITLE

Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Alma T. Young
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Page #