

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003856

FILED
Mar 09, 2006
Secretary of State

Entity Name: COALITION FOR IMPROVING MATERNITY SERVICES, INC.

Current Principal Place of Business:

620-11 PONTE VEDRA BLVD
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

PO BOX 2346
PONTE VEDRA BEACH, FL 32004

New Mailing Address:

FEI Number: 59-3649578 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIES, RAE
620-11 PONTE VEDRA BLVD
PONTE VEDRA BEACH, FL 32082 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: TD () Delete
Name: KENDELL, MICHELLE
Address: 8540 LINCOLN
City-St-Zip: HUNTINGTON WOODS, MI 48070

Title: VD () Delete
Name: JUKELEVICS, NICETTE
Address: 24050 MADISON ST #200
City-St-Zip: TORRANCE, CA 90505

Title: PD () Delete
Name: WOOLLEY, DEBORAH
Address: 1143 S CLINTON AVENUE
City-St-Zip: OAK PARK, IL 60304

Title: D () Delete
Name: HOLLAND, CATHY
Address: 1127 BERKSHIRE RD
City-St-Zip: GROSSE PTE, MI 48230

Title: D () Delete
Name: PORTER, JESSICA
Address: 4 WILLOW STREET
City-St-Zip: DEDHAM, MA 02026

Title: SD () Delete
Name: SMITH, LINDA
Address: 6540 CEDARVIEW COURT
City-St-Zip: DAYTON, OH 45459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: WOOLLEY, DEBORAH
Address: 6698 ANTIGUA BLVD
City-St-Zip: SAN DIEGO, CA 92124

Title: D (X) Change () Addition
Name: SUSAN, MAJORIS
Address: 248 ELM ST
City-St-Zip: INDIANA, PA 15701

Title: VD (X) Change () Addition
Name: PORTER, JESSICA
Address: 4 WILLOW ST
City-St-Zip: DEDHAM, MA 02026

Title: SD (X) Change () Addition
Name: MAYRI SAGADY, LESLIE
Address: 5195 AVENIDA PLAYA CUNCUN
City-St-Zip: SAN DIEGO, CA 92124

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: RAE DAVIES

Electronic Signature of Signing Officer or Director

RA

03/09/2006

Date