

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000003105

**FILED**  
**Apr 02, 2010**  
**Secretary of State**

**Entity Name:** THE FLORIDA SUNCOAST WOMEN'S FORUM, INC.

**Current Principal Place of Business:**

6120 S. LOCKWOOD RIDGE  
SARASOTA, FL 34231 US

**New Principal Place of Business:**

**Current Mailing Address:**

6120 S. LOCKWOOD RIDGE  
SARASOTA, FL 34231 US

**New Mailing Address:**

**FEI Number:** 65-0846853

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NOYES, KIMBERLY A  
6120 S. LOCKWOOD RIDGE RD  
SARASOTA, FL 34231 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:** P  
**Name:** STRYKER, LAUREY  
**Address:** 6618 VIRGINIA CROSSING  
**City-St-Zip:** UNIVERSITY PARK, FL 34201

**Title:** T  
**Name:** MAKOWSKI, KAREN  
**Address:** 50 JOEL BLVD.  
**City-St-Zip:** LEHIGH ACRES, FL 33936

**Title:** S  
**Name:** START, JOANNE  
**Address:** P. O. BOX 1687  
**City-St-Zip:** ST. PETERSBURG, FL 33731

I hereby 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 all other like empowered.

**SIGNATURE:** LAUREY STRYER

P

04/02/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date