## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 766522** 

Entity Name: FLORIDA ASSOCIATION FOR WOMEN LAWYERS, INC.

**FILED** Jan 11, 2015 **Secretary of State** CC8269771859

**Current Principal Place of Business:** 

1439 WEST BROOME STREET

LANTANA. FL 33462

**Current Mailing Address:** 

P.O. BOX 3228

LANTANA. FL 33465-3228 US

FEI Number: 59-2383909 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAHONEY, JENNIFER 1439 WEST BROOME STREET LANTANA, FL 33462 US

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: JENNIFER MAHONEY 01/11/2015

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **SECRETARY** Title PAST- PRESIDENT HASTINGS, KIM MAXEY, BRITTANY Name Name

BRENNAN, MANNA & DIAMOND, P.L. Address Address MAXEY LAW OFFICES, PLLC

3301 BONITA BEACH ROAD #100 100 SECOND AVENUE SOUTH SUITE

Address

401 NORTH BONITA SPRINGS FL 34134

City-State-Zip: ST. PETERSBURG FL 33701 City-State-Zip:

Title ED

Title **TREASURER** Name MAHONEY, JENNIFER

Name FEATHERSTON, ROBYN 1439 WEST BROOME STREET Address

City-State-Zip: LANTANA FL 33462 City-State-Zip: ST. PETERSBURG FL 33733

Title **PRESIDENT** BRESKY, ROBIN Name

THE LAW OFFICES OF ROBIN Address

**BRESKY** 

6111 BROKEN SOUND PARKWAY NW

SUITE 260

City-State-Zip: **BOCA RATON FL 33487** 

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: JENNIFER MAHONEY

Electronic Signature of Signing Officer/Director Detail

EXECUTIVE DIRECTOR

P. O. BOX 12084

01/11/2015

Date