#### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000003856

Entity Name: COALITION FOR IMPROVING MATERNITY SERVICES, INC.

FILED
Jan 23, 2016
Secretary of State
CC2634893905

# **Current Principal Place of Business:**

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

# **Current Mailing Address:**

P.O. BOX 33590

RALEIGH, NC 27607 US

FEI Number: 59-3649578 Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

DAVIES, RAE 620-11 PONTE VEDRA BLVD PONTE VEDRA BEACH, FL 32082 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

 Title
 PRESIDENT
 Title
 DIRECTOR

 Name
 MACIOCE-STUMPF, VICTORIA
 Name
 WILF, RUTH

Address 2437 SANDERS PLACE Address 712 ARLINGTON ROAD

City-State-Zip: BLOOMFIELD HILLS MI 48302 City-State-Zip: NARBETH PA 19072

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: VICTORIA MACIOCE-STUMPF

**PRESIDENT** 

01/23/2016