#### 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001776

Entity Name: AMERICA'S FEMALE FIREFIGHTERS, INC.

FILED
Apr 15, 2014
Secretary of State
CC4058925413

## **Current Principal Place of Business:**

15757 PINES BLVD

#401

PEMBROKE PINES, FL 33027-1220

## **Current Mailing Address:**

15757 PINES BLVD

#401

PEMBROKE PINES, FL 33027-1220 US

FEI Number: 16-1692647 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

SASSO, PAUL RESQ 7721 S.W. 62 AVENUE SUITE 202

S. MIAMI, FL 33143 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 DP Title D, S

Name KUPINSKI, LAURA Name BAUGHMAN, LUANNA
Address 15757 PINES BLVD #401 Address 15757 PINES BLVD

#401

City-State-Zip: PEMBROKE PINES FL 33027

City-State-Zip: PEMBROKE PINES FL 33027-1220

Title D, VP Title D

Name SPRING, MARIAN Name GIDDENS, PHILLIP

Address 15757 PINES BLVD #401 Address 15757 PINES BLVD #401

City-State-Zip: PEMBROKE PINES FL 33027-1220 City-State-Zip: PEMBROKE PINES FL 33027

Title D Title DT

Name CASAMAYOR, GUS Name HARRIS, TAMMIE

Address 15757 PINES BLVD #401 Address 15757 PINES BLVD #401

City-State-Zip: PEMBROKE PINES FL 33027 City-State-Zip: PEMBROKE PINES FL 33027

Title DIRECTOR

Name BROWN, CHRIS

Address 15757 PINES BLVD

#401

City-State-Zip: PEMBROKE PINES FL 33027-1220

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: LUANNA BAUGHMAN

**SECRETARY** 

04/15/2014