

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001776

Entity Name: AMERICA'S FEMALE FIREFIGHTERS, INC.**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
Name	KUPINSKI, LAURA
Address	15757 PINES BLVD #401
City-State-Zip:	PEMBROKE PINES FL 33027

Title	D, S
Name	BAUGHMAN, LUANNA
Address	15757 PINES BLVD #401
City-State-Zip:	PEMBROKE PINES FL 33027-1220

Title	D, VP
Name	SMOLEN, VANESSA
Address	15757 PINES BLVD #401
City-State-Zip:	PEMBROKE PINES FL 33027-1220

Title	D
Name	GIDDENS, PHILLIP
Address	15757 PINES BLVD #401
City-State-Zip:	PEMBROKE PINES FL 33027

Title	D
Name	CASAMAYOR, GUS
Address	15757 PINES BLVD #401
City-State-Zip:	PEMBROKE PINES FL 33027

Title	DT
Name	HARRIS, TAMMIE
Address	15757 PINES BLVD #401
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: LAURA KUPINSKI

PRESIDENT

04/02/2013

Electronic Signature of Signing Officer/Director Detail

Date