2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008187

Entity Name: LIFE'S CHOICES WOMEN'S CLINIC, INC.

FILED Jan 23, 2024 **Secretary of State** 8508299250CC

Current Principal Place of Business:

27 E PINEHURST BLVD **UNIT A**

EUSTIS, FL 32726

Current Mailing Address:

27 E PINEHURST BLVD **UNIT A**

EUSTIS, FL 32726 US

FEI Number: 86-1146587 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HENSINGER, BETTY 5556 S ROUND LAKE RD APOPKA, FL 32712 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: BETTY HENSINGER 01/23/2024

Electronic Signature of Registered Agent

Date

01/23/2024

Date

Officer/Director Detail:

CEO Title Title VΡ

MARRON, MARCIA A BERENS, CHRIS Name Name

27 E PINEHURST BLVD Address Address 6779 ROUND LAKE RD

UNIT A

City-State-Zip: MOUNT DORA FL 32757 EUSTIS FL 32726 City-State-Zip:

Title **BOARD MEMBER** Title **TREASURER** Name ARTHUR, AUSTIN

Name MCCULLOUGH, SCOTT

Address 1419 MISTFLOWER LANE 1150 GROVE AVE Address

City-State-Zip: WINTER GARDEN FL 34787 MOUNT DORA FL 32757 City-State-Zip:

Title **BOARD MEMBER** Title **BOARD MEMBER** Name HUNTLEY, ERIN

Name COSTELLO, FRED P 10920 LEDGEMENT LN Address

Address 9840 SPRING LAKE DR City-State-Zip: WINDERMERE FL 34786 City-State-Zip: CLERMONT FL 34711

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: MARCIA MARRON **CEO**

Electronic Signature of Signing Officer/Director Detail