2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002791

Entity Name: FLORIDA WOMEN'S POLITICAL NETWORK, INC

FILED
Mar 14, 2014
Secretary of State
CC5668873903

Current Principal Place of Business:

39 NORWICH CIRCLE NICEVILLE. FL 32578

Current Mailing Address:

39 NORWICH CIRCLE NICEVILLE, FL 32578 US

FEI Number: 75-3228465 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JACOBSON, GAYLE 39 NORWICH CIRCLE NICEVILLE, FL 32578 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: GAYLE JACOBSON 03/14/2014

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRESIDENT Title VP EVENTS

Name JACOBSON, GAYLE Name ALBERTELLI, JUDITH

Address 39 NORWICH CIRCLE Address 11651 OLDES MANDARIN ROAD

City-State-Zip: NICEVILLE FL 32578 City-State-Zip: JACKSONVILLE FL 32223

Title **TREASURER** Title **VP COMMUNICATIONS** Name COGSWELL, PAT Name KURPANIK, LILIANA Address 5902 GOLDEN ROAD Address 1205 MANUEL COURT SEBRING FL 33875 City-State-Zip: ST, AUGUSTINE FL 32095 City-State-Zip:

Title VP FUNDRAISING Title EXEC. SECRETARY
Name BUCHANAN, JERRY Name ACCOLA, CAROLYN

Address 7516 CHAPEL HILL DRIVE Address 5143 CRANES POINT COURT

City-State-Zip: ORLANDO FL 32514 City-State-Zip: ORLANDO FL 32839

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: PATRICIA S. COGSWELL

TREASURER

03/14/2014

Date