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: SHEILA MILLER

Electronic Signature of Signing Officer/Director Detail

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002791

Entity Name: FLORIDA WOMEN'S POLITICAL NETWORK, INC

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

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 | | 04/21/2015 | |
|---------------------------|--|-----------------|---------------------------|---|
| | Electronic Signature of Registered Agent | | Date | - |
| 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 | VP COMMUNICATIONS | Title | TREASURER | |
| Name | KURPANIK, LILIANA | Name | MILLER, SHEILA | |
| Address | 1205 MANUEL COURT | Address | 5132 ROWE TRAIL | |
| City-State-Zip: | ST, AUGUSTINE FL 32095 | City-State-Zip: | PACE FL 32571 | |
| 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 | |

TREASURER

04/21/2015

FILED Apr 21, 2015 Secretary of State CC9270083532

Certificate of Status Desired: No

Date