

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000010475

**Entity Name:** PAN AMERICAN UNIVERSITY WOMEN, INC.

**Current Principal Place of Business:**

C/O KATHLEEN M. FERNANDEZ, ESQ.  
2323 1/2 AILEEN STREET  
TAMPA, FL 33607

**Current Mailing Address:**

C/O KATHLEEN M. FERNANDEZ, ESQ.  
2323 1/2 AILEEN STREET  
TAMPA, FL 33607

**FEI Number:** 45-3933062

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FERNANDEZ, KATHLEEN MESQ  
2323 1/2 AILEEN STREET  
TAMPA, FL 33607 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 P  
Name AYRES, NURI  
Address 13022 WHISPER SOUND DRIVE  
City-State-Zip: TAMPA FL 33618

Title V  
Name CALTAGIRONE, NORMA  
Address 9100 DR. MLK JR. ST N #406  
City-State-Zip: ST. PETERSBURG FL 33702

Title S  
Name CASTILLO, CYNTHIA  
Address 222 S. GLEN AVE  
City-State-Zip: TAMPA FL 33609

Title T  
Name LEVINSON, GAETANA  
Address 7909 RIVER RIDGE DRIVE  
City-State-Zip: TAMPA FL 33637

*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:** NURI AYRES

**PRESIDENT**

**03/18/2015**

Electronic Signature of Signing Officer/Director Detail

Date