

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000005442

**Entity Name:** ASSOCIATION FOR ABUSED WOMEN & CHILDREN, INC.

**Current Principal Place of Business:**

1732 SOUTH CONGRESS AVE.  
#351  
PALM SPRINGS, FL 33461

**Current Mailing Address:**

1732 SOUTH CONGRESS AVE.  
#351  
PALM SPRINGS , FL 33461 US

**FEI Number:** 65-0625725

**Certificate of Status Desired:** No

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

TIMMERMAN, HARRIETTE  
1732 SOUTH CONGRESS AVE.  
#351  
PALM SPRINGS, FL 33461 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 TD  
Name FENDER, TIRREL D III  
Address 1732 SOUTH CONGRESS AVE.  
#351  
City-State-Zip: PALM SPRINGS FL 33461

Title PRES  
Name ANDERSON, SONDRRA  
Address 1311 N.J. ST.  
City-State-Zip: LAKE WORTH FL 33460

Title VP  
Name HOLLISTER, NANCY  
Address 1732 SOUTH CONGRESS AVE.  
#351  
City-State-Zip: PALM SPRINGS FL 33461

Title EXD  
Name FENDER, M. TIMA  
Address 1732 SOUTH CONGRESS AVE.  
#351  
City-State-Zip: PALM SPRINGS FL 33461

*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:** M. TIMA FENDER

**EXECUTIVE DIRECTOR**

**03/05/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date