

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004119

**FILED
Apr 07, 2016
Secretary of State
CC8953538639**

Entity Name: CENTRAL FLORIDA WOMEN'S EMERGENCY FUND, INC.

Current Principal Place of Business:

415 WARRENTON RD.
WINTER PARK, FL 32792

Current Mailing Address:

P.O. BOX 536522
ORLANDO, FL 32853 US

FEI Number: 59-3396077

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POLLEY, JOANN
415 WARRENTON RD
WINTER PARK, FL 32792 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 DT
Name POLLEY, JOANN
Address 415 WARRENTON ROAD
City-State-Zip: WINTER PARK FL 32792

Title DS
Name KELLMAN, NANCY
Address 3019 NORTHWOOD BLVD.
City-State-Zip: WINTER PARK FL 32789

Title DV
Name ELROD, BARBARA
Address 1620 MAYFLOWER COURT
City-State-Zip: WINTER PARK FL 32792

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: JOANN POLLEY

PRESIDENT

04/07/2016

Electronic Signature of Signing Officer/Director Detail

Date