

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005185

Entity Name: WOMEN OF TOMORROW MENTOR AND SCHOLARSHIP PROGRAM, INC.**FILED**
Jan 21, 2024
Secretary of State
6119950990CC**Current Principal Place of Business:**8400 NW 36 STREET
SUITE 450
DORAL, FL 33166**Current Mailing Address:**8400 NW 36 STREET
SUITE 450
DORAL, FL 33166 US**FEI Number: 65-0862995****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**GALL, DARICE EXECUTIVE DIRECTOR
4400 BISCAYNE BLVD
SUITE 580
MIAMI, FL 33137-3212 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: DARICE GALL****01/21/2024**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** DP
Name VALOPPI, JENNIFER V
Address 4400 BISCAYNE BLVD
SUITE 580
City-State-Zip: MIAMI FL 33137-3212**Title** DT
Name BYINGTON, JAMIE
Address 4400 BISCAYNE BLVD
SUITE 580
City-State-Zip: MIAMI FL 33137-3212**Title** DIRECTOR
Name ROBINSON, TRINA
Address 4400 BISCAYNE BLVD
SUITE 580
City-State-Zip: MIAMI FL 33137-3212**Title** DIRECTOR
Name HOLECEK, SHRANKHLA
Address 4400 BISCAYNE BLVD
SUITE 580
City-State-Zip: MIAMI FL 33137-3212**Title** DVP
Name RUNDLE, KATHERINE F
Address 1350 N W 12TH AVENUE
City-State-Zip: MIAMI FL 33126**Title** DIRECTOR
Name SWAEBE, DANIELA
Address 4400 BISCAYNE BLVD
SUITE 580
City-State-Zip: MIAMI FL 33137-3212**Title** DIRECTOR
Name KAUFMAN, ROSITA J
Address 4400 BISCAYNE BLVD
SUITE 580
City-State-Zip: MIAMI FL 33137-3212

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: JENNIFER VALOPPI**PRESIDENT****01/21/2024**

Electronic Signature of Signing Officer/Director Detail

Date