

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 14, 2014
Secretary of State
CC7763979663

Entity Name: WOMEN OF TOMORROW MENTOR AND SCHOLARSHIP PROGRAM, INC.

Current Principal Place of Business:

22 E. FLAGLER ST.
6TH FLOOR
MIAMI, FL 33131

Current Mailing Address:

22 E. FLAGLER ST.
6TH FLOOR
MIAMI, FL 33131 US

FEI Number: 65-0862995

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GREEN, JONATHAN H
799 BRICKELL PLAZA STE 700
MIAMI, FL 33131 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 DP
Name VALOPPI, JENNIFER V
Address 22 E. FLAGLER ST., 6TH FLOOR
City-State-Zip: MIAMI FL 33131

Title DVP
Name BROWNE, DON
Address 22 E. FLAGLER ST., 6TH FLOOR
City-State-Zip: MIAMI FL 33131

Title DVP
Name RUNDLE, KATHERINE F
Address 1350 N W 12TH AVENUE
City-State-Zip: MIAMI FL 33126

Title DT
Name BYINGTON, JAMIE
Address 255 ALHAMBRA CIRCLE, SUITE 900
City-State-Zip: CORAL GABLES FL 33134

Title D
Name TOCCIN, MARISA
Address 22 E. FLAGLER ST., 6TH FLOOR
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name HOWARD, ELSIE
Address 22 E. FLAGLER ST.
6TH FLOOR
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name DIMARE, SWANEE
Address 22 E. FLAGLER ST.
6TH FLOOR
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name SILVERS, LAURIE
Address 22 E. FLAGLER ST.
6TH FLOOR
City-State-Zip: MIAMI FL 33131

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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

01/14/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SREBNICK, MARIITA
Address 22 E. FLAGLER ST.
 6TH FLOOR
City-State-Zip: MIAMI FL 33131