

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000005185

**Entity Name:** WOMEN OF TOMORROW MENTOR AND SCHOLARSHIP PROGRAM, INC.**FILED**  
**Jan 28, 2013**  
**Secretary of State**  
**CC5020688011****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: No****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	DS
Name	HUGHES, LISA
Address	2290 WEST 8TH AVE, H BUILDING
City-State-Zip:	HIALEAH FL 33010

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

**Continues on page 2**

*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****01/28/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

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

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