

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000006025

**Entity Name:** FEMALE VOICES EARLY INTERVENTIONS AND  
ENCHANCEMENT PROGRAMS, INC.

**Current Principal Place of Business:**

1010 WINFIELD FOREST DRIVE  
TALLAHASSEE, FL 32317

**Current Mailing Address:**

P.O. BOX 6534  
TALLAHASSEE, FL 32314 US

**FEI Number: 59-3538378**

**Certificate of Status Desired: Yes**

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

JAMES, LORRAINE  
FEMALE VOICES EARLY INTERVENTIONS  
PO BOX 6532  
TALLAHASSEE, FL 32314 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 ED  
Name JAMES, LORRAINE  
Address P.O.BOX 6534  
City-State-Zip: TALLAHASSEE FL 32314

Title P  
Name VAUGHN, KARYN  
Address 8472 SOUTHERN PARK DRIVE  
City-State-Zip: TALLAHASSEE FL 32305

Title VPT  
Name PORTER, MARY  
Address 8492 SOUTHERN PARK DRIVE  
City-State-Zip: TALLAHASSEE FL 32305

Title VP  
Name SANFORD, LESSIE  
Address 1401 CALLEN STREET  
City-State-Zip: TALLAHASSEE FL 32310

*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: LORRAINE JAMES**

**EXECUTIVE DIRECTOR**

**01/26/2015**

Electronic Signature of Signing Officer/Director Detail

Date