## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000097300

Entity Name: WOMENCARE, INC.

**Current Principal Place of Business:** 

930 LAKE BALDWIN LANE ORLANDO, FL 32814

**Current Mailing Address:** 

930 LAKE BALDWIN LANE ORLANDO, FL 32814

FEI Number: 59-3673764 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARRY, BRENDA M 930 LAKE BALDWIN LANE ORLANDO, FL 32814 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

FILED Apr 06, 2016

**Secretary of State** 

CC3232567489

Officer/Director Detail:

Title PTD Title VSD

Name BARRY, BRENDA MMD Name GAYLE, VICKIE L

Address 930 LAKE BALDWIN LANE Address 930 LAKE BALDWIN LANE
City-State-Zip: ORLANDO FL 32814 City-State-Zip: ORLANDO FL 32814

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VICKIE GAYLE VP BU

Electronic Signature of Signing Officer/Director Detail

VP BUS MGR 04/06/2016

Date