

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Monahan
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 31 PM 2:42

DOCUMENT # 574524 (5)

1. Corporation Name

RALEIGH WOMEN'S HEALTH ORGANIZATION, INC.

Principal Place of Business

3990 SHERIDAN ST #212
HOLLYWOOD FL 33021

Mailing Address

3990 SHERIDAN ST #212
HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE.

3. Date incorporated or Qualified 06/02/1978	3a. Date of Last Report 01/25/1994
4. FEI Number 59-1830815	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21. 4401 Sheridan St. Suite, Apt. #, etc.	2a. Mailing Address 25. 4401 Sheridan St. Suite, Apt. #, etc.
22. #105 City & State	27. #105 City & State
23. Hollywood, FL Zip Country	28. Hollywood, FL Zip Country
24. 33021 USA	29. 33021 USA

9. Name and Address of Current Registered Agent

YACHNOWITZ STUART
3990 SHERIDAN ST #212
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

81. Name Mark London
82. Street Address (P.O. Box Number is Not Acceptable) 4030-Sheridan St.
83.
84. City Hollywood FL
85. Zip Code 33021

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent's signature required when reappointing)

DATE

Mark S. London 1-19-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.	
TITLE PD	YACHNOWITZ, STUART	1.1 TITLE PD	☒ Change ☐ Addition
NAME	YACHNOWITZ, STUART	1.2 NAME	Yachnowitz, Stuart
STREET ADDRESS	3990 SHERIDAN ST #212	1.3 STREET ADDRESS	4401 Sheridan St. #105
CITY-ST-ZIP	HOLLYWOOD FL	1.4 CITY-ST-ZIP	Hollywood, FL 33021
TITLE D	YACHNOWITZ, JOSEPH	2.1 TITLE D	☒ Change ☐ Addition
NAME	YACHNOWITZ, JOSEPH	2.2 NAME	Yachnowitz, Joseph
STREET ADDRESS	3990 SHERIDAN ST #212	2.3 STREET ADDRESS	4401 Sheridan St. #105
CITY-ST-ZIP	HOLLYWOOD FL	2.4 CITY-ST-ZIP	Hollywood, FL 33021
TITLE P	YACHNOWITZ, JOSEPH	3.1 TITLE P	☒ Change ☐ Addition
NAME	YACHNOWITZ, JOSEPH	3.2 NAME	Yachnowitz, Joseph
STREET ADDRESS	3990 SHERIDAN ST #212	3.3 STREET ADDRESS	4401 Sheridan St. #105
CITY-ST-ZIP	HOLLYWOOD FL	3.4 CITY-ST-ZIP	Hollywood, FL 33021
TITLE VP	HILL SUSAN	4.1 TITLE VP	☐ Change ☐ Addition
NAME	HILL SUSAN	4.2 NAME	Hill, Susan
STREET ADDRESS	3990 SHERIDAN ST #212	4.3 STREET ADDRESS	4401 Sheridan St. #105
CITY-ST-ZIP	HOLLYWOOD FL	4.4 CITY-ST-ZIP	Hollywood, FL 33021
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of this corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stuart Yachnowitz 1-19-95 (305) 987-6600