## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 708911** 

FILED Apr 30, 2008 Secretary of State

Entity Name: PLANNED PARENTHOOD OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

3850 BEACH BLVD

JACKSONVILLE, FL 32207 US

Current Mailing Address: New Mailing Address:

3850 BEACH BLVD

JACKSONVILLE, FL 32207 US

FEI Number: 59-1061757 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

STEIGER, CAROLE ANN MURPHY, DONNA M CEO 338 7TH STREET 3850 BEACH BLVD.

ATLANTIC BEACH, FL 32233 US JACKSONVILLE, FL 32207 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: DONNA M. MURPHY 04/30/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

Name:MARTIN, CHRISTOPHERName:MARTIN, CHRISTOPHERAddress:405 ST. JOHNS AVEAddress:3850 BEACH BLVD.

City-St-Zip: GREEN COVE SPRINGS, FL 32043 City-St-Zip: JACKSONVILLE, FL 32207

Title: S ( ) Delete Title: S (X) Change ( ) Addition Name: REDDICK, KENNETH W REDDICK, KENNETH W

Address: 3753 JACOB COVE WAY Address: 3850 BEACH BLVD.

City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: JACKSONVILLE, FL 32207

Title: V ( ) Delete Title: C (X) Change ( ) Addition

 Name:
 SAGER, NEIL DR
 Name:
 MURPHY, DONNA M C

 Address:
 4131 SOUTH UNIVERSITY BLVD
 Address:
 3850 BEACH BLVD.

 City-St-Zip:
 JACKSONVILLE, FL 32216
 City-St-Zip:
 JACKSONVILLE, FL 32207

Title: C (X) Delete Title: ( ) Change ( ) Addition

 Name:
 STEIGER, CAROLE ANN
 Name:

 Address:
 338 7TH STREET
 Address:

 City-St-Zip:
 ATLANTIC BEACH, FL 32233
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DONNA M. MURPHY CEO 04/30/2008