## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#710922** 

FILED Apr 09, 2004 Secretary of State

Entity Name: PLANNED PARENTHOOD OF SOUTHWEST AND CENTRAL FLORIDA, INC.

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

2055 WOOD ST. SUITE 110

SARASOTA, FL 34237

**New Mailing Address: Current Mailing Address:** 

2055 WOOD ST. SUITE 110 SARASOTA, FL 34237

FEI Number: 59-1274328 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

ZDRAVECKY, BARBARA 707 FERN ST P O BOX 1292 ANNA MARIA, FL 34216 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

## **OFFICERS AND DIRECTORS:**

() Delete CANNON, WALT Name: 1958 PROSPECT ST Address: City-St-Zip: SARASOTA, FL 34239

Title: VCD () Delete STRANG, SHERYLL Name: Address: 1958 PROSPECT ST City-St-Zip: SARASOTA, FL 34239

Title: SD () Delete

LEE, ANN Name:

1958 PROSPECT STREET Address: City-St-Zip: SARASOTA, FL 34239

Title: TD ( ) Delete Name: HICKERSON, GARY

1991 MAIN STREET, SUITE 147 Address:

City-St-Zip: SARASOTA, FL 34236

Title: VCD () Delete CUDZILD, WENDY Name: 1958 PROSPECT ST Address: City-St-Zip: SARASOTA, FL 34239 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

CANNON, WALT Name:

Address: 2055 WOOD ST, SUITE 110 City-St-Zip: SARASOTA, FL 34237

Title: (X) Change ( ) Addition

Name: STRANG, SHERYLL Address: 2055 WOOD ST. SUITE 110 City-St-Zip: SARASOTA, FL 34237

Title: SD (X) Change ( ) Addition

LEE, ANN Name:

2055 WOOD ST, SUITE 110 Address: City-St-Zip: SARASOTA, FL 34237

Title: TD (X) Change ( ) Addition

Name: HICKERSON, GARY 2055 WOOD ST, SUITE 110 Address: City-St-Zip: SARASOTA, FL 34237

Title: VCD (X) Change ( ) Addition

GARCIA, ADRIENNE Name: 2055 WOOD ST, SUITE 110 Address: City-St-Zip: SARASOTA, FL 34237

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GARY HICKERSON TD 04/09/2004