

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # 728233 (8)

1. Corporation Name

FEMINIST WOMEN'S HEALTH CENTER, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB - 6 PM 12: 22

Principal Place of Business

241 E SIXTH AVE
TALLAHASSEE FL 32303

Mailing Address

241 E SIXTH AVE
TALLAHASSEE FL 32303

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/14/1974

3a. Date of Last Report

01/20/1994

4. FBI Number

59-1510378

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

7. Nonprofit with IRS 501(c)(3)

Tax Exempt Status

☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,

Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

GREY, LINDA
241 E SIXTH AVE
TALLAHASSEE FL 32303

10. Name and Address of New Registered Agent

81 Name

JOYNER, BRENDA A.

82 Street Address (P.O. Box Number is Not Acceptable)

241 E SIXTH AVE

83

84 City

TALLAHASSEE

FL

85 Zip Code

32303

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

Brenda A. Joyner

BRENDA A. JOYNER, PRESIDENT

January 17, 1995

Signature, typed or printed name of registered agent and if applicable, (NOTE: Registered Agent signature required when transferring)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

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