

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738556

FILED
May 03, 2005
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF PLANNED PARENTHOOD AFFILIATES, INC.

Current Principal Place of Business:

317 EAST PARK AVENUE
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

317 EAST PARK AVENUE
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-1741900 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GUTMAN, STEPHANIE
317 EAST PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

GRUTMAN, STEPHANIE
317 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: STEPHANIE GRUTMAN

05/03/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TAMAYO, LILLIAN
Address: 5312 BROADWAY
City-St-Zip: WEST PALM BEACH, FL 33407

Title: TD () Delete
Name: CAPABIANCO, MARY
Address: 455 NW 35TH STREET
City-St-Zip: BOCA RATON, FL 33431

Title: VD () Delete
Name: WENDEL, CHARLENE
Address: 1425 CREECH ROAD
City-St-Zip: NAPLES, FL 34103

Title: SD () Delete
Name: ZDRAVECKY, BARBARA
Address: 1958 PROSPECT ST
City-St-Zip: SARASOTA, FL 34239

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WENDEL, CHARLENE
Address: 1425 CREECH ROAD
City-St-Zip: NAPLES, FL 34103

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: IDTENSOHN, SUE
Address: 1350 W COLONIAL DR
City-St-Zip: ORLANDO, FL 32804

Title: SD (X) Change () Addition
Name: STIGER, CAROL ANN
Address: 3850 BEACH BLVD
City-St-Zip: JACKSONVILLE, FL 32207

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: CHARLENE WENDEL

PD

05/03/2005

Electronic Signature of Signing Officer or Director

Date