

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011232

FILED
Feb 16, 2011
Secretary of State

Entity Name: WOMAN TO WOMAN BREAST CANCER FOUNDATION, INC

Current Principal Place of Business:

4850 W OAKLAND PARK BLVD
225
LAUDERDALE LAKES, FL 33313

New Principal Place of Business:

Current Mailing Address:

4850 W OAKLAND PARK BLVD
225
LAUDERDALE LAKES, FL 33313

New Mailing Address:

FEI Number: 26-1448585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS RD
#221E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

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:

Title: P
Name: GRAY, JACQUELINE R
Address: 11784 NW 5 STREET
City-St-Zip: PLANTATION, FL 33325

Title: VP/T
Name: GRAY, KEVIN H
Address: 11784 NW 5 STREET
City-St-Zip: PLANTATION, FL 33325

Title: DIRE
Name: DAFNA LEBOW, M.D. GYNECOLOGY/OBSTERICS
Address: 333 NW 70TH AVENUE, SUITE 120
City-St-Zip: PLANTATON, FL 33312

Title: SE
Name: GRAY, KEANDRA D
Address: 11784 NW 5 STREET
City-St-Zip: PLANTATION, FL 33325

Title: DIRE
Name: DR. EBON BOURNE
Address: 501 NW 84 AVENUE SUITE 301
City-St-Zip: PLANTATION, FL 33324

I hereby 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 all other like empowered.

SIGNATURE: JACQUELINE R GRAY

PRES

02/16/2011

Electronic Signature of Signing Officer or Director

Date