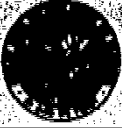


FILE NOW: FILING FEE AFTER MAY 1 IS \$100.00

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Monahan Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N15378
 1. Corporation Name
COMMUNITY COALITION for Women's History Inc.
40 YWCA

Principal Place of Business Mailing Address
351 NW 5th
MIAMI FL 33128 (same)

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

9. Name and Address of Current Registered Agent
GLEND A BELOTE

3. Date Incorporated or Qualified 3a. Date of Last Report
1994

4. FEI Number 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

10. Name and Address of New Registered Agent

81 Name	GLEND A BELOTE
82 Street Address (P.O. Box Number is Not Acceptable)	9915 SW 134 Court
83 City & State	MIAMI FL
84 Zip	33186

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 **Glenda A. Belote** DATE **March 24, 1995**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRES.	1.1 TITLE	President / Director ☒ Change ☐ Addition
NAME	G. BELOTE	1.2 NAME	Evelyn Shea
STREET ADDRESS	9915 SW 134 COURT	1.3 STREET ADDRESS	10107 SW 134 Place
CITY - ST - ZIP	MIAMI FL 33186	1.4 CITY - ST - ZIP	Miami, FL 33186 ☒ Change ☐ Addition
TITLE	VICE - PRES.	2.1 TITLE	Vice President / Director ☒ Change ☐ Addition
NAME	EVELYN SHEA	2.2 NAME	Suzette Pope
STREET ADDRESS	10107 SW 134 PLACE	2.3 STREET ADDRESS	3925 NW 4 Terrace
CITY - ST - ZIP	MIAMI FL 33186	2.4 CITY - ST - ZIP	Miami, FL 33126 ☒ Change ☐ Addition
TITLE	SEC.	3.1 TITLE	Secretary / Director ☒ Change ☐ Addition
NAME	BONNIE ASKOWITZ	3.2 NAME	Phyllis Teitelbaum
STREET ADDRESS	12101 SW 93 AVE	3.3 STREET ADDRESS	9622 SW 69 Place
CITY - ST - ZIP	MIAMI FL 33176	3.4 CITY - ST - ZIP	Miami, FL 33156 ☐ Change ☐ Addition
TITLE	TREA.	4.1 TITLE	Treasurer / Director ☐ Change ☐ Addition
NAME	Ama Magda Gullery	4.2 NAME	No Change
STREET ADDRESS	250 CATAKONIA AVE #400	4.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33124	4.4 CITY - ST - ZIP	
TITLE	SECRET.	5.1 TITLE	Director ☒ Change ☐ Addition
NAME	ALICIA S BARD	5.2 NAME	Elizabeth Kaynor
STREET ADDRESS	1550 MADRUGA AVENUE	5.3 STREET ADDRESS	2600 S Bayshore Drive
CITY - ST - ZIP	MIAMI FL 33146	5.4 CITY - ST - ZIP	Miami, FL 33133
TITLE	ALINA E. BECKER, DIRECTOR	6.1 TITLE	Director ☒ Change ☐ Addition
NAME	300 SW 12 AVE, 3RD FLOOR	6.2 NAME	Eugenia Thomas
STREET ADDRESS	MIAMI FL 33130-2038	6.3 STREET ADDRESS	1110 NW 41 Street
CITY - ST - ZIP		6.4 CITY - ST - ZIP	Miami, FL 33127

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Glenda A. Belote** **TREASURER** **3/3/95** **444 2423**