

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2002 8:00 am
Secretary of State

03-07-2002 90051 024 ****61.25

1203230

DOCUMENT # N30226

1. Entity Name

FIRST CHOICE WOMEN'S CENTERS, INC.

Principal Place of Business

Mailing Address

**257 NORTH KROME AVE
 HOMESTEAD FL 33030
 US**

**257 K. KROME AVENUE
 HOMESTEAD FL 33030
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0098388

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HALE, ALEXIS
 19321 STERLING DR
 MIAMI FL 33157**

Name

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

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T
 TITLE: FLYNT, JOCELYN Delete
 NAME: FLYNT, JOCELYN
 STREET ADDRESS: 16740 SW 280 ST
 CITY-ST-ZIP: HOMESTEAD FL 33031

COB
 TITLE: Jack Zimmerman Change Addition
 NAME: Jack Zimmerman
 STREET ADDRESS: 7050 SW 67 Avenue
 CITY-ST-ZIP: Miami, FL 33143

COB
 TITLE: MCANULTY, KEVIN Delete
 NAME: MCANULTY, KEVIN
 STREET ADDRESS: 27500 OLD DIXIE HWY
 CITY-ST-ZIP: HOMESTEAD FL 33032

VCOB
 TITLE: Kevin McAnulty Change Addition
 NAME: Kevin McAnulty
 STREET ADDRESS: 27500 Old Dixie Hwy
 CITY-ST-ZIP: Naranja, FL 33032

VCOB
 TITLE: PETERSON, WADE Delete
 NAME: PETERSON, WADE
 STREET ADDRESS: 234 N. KROME AVE
 CITY-ST-ZIP: HOMESTEAD FL 33030

S
 TITLE: Wade Peterson Change Addition
 NAME: Wade Peterson
 STREET ADDRESS: 234 N. Krome Avenue
 CITY-ST-ZIP: Homestead, FL 33030

S
 TITLE: BIRDWELL, RUTH Delete
 NAME: BIRDWELL, RUTH
 STREET ADDRESS: 9451 SW 30 TERRACE
 CITY-ST-ZIP: MIAMI FL 33165

T
 TITLE: Shirlee Simpson Change Addition
 NAME: Shirlee Simpson
 STREET ADDRESS: 9815 Marlin Road
 CITY-ST-ZIP: Miami, FL 33157

D
 TITLE: MORALWS, BEVERLY Delete
 NAME: MORALWS, BEVERLY
 STREET ADDRESS: 12841 SW 115 TERRACE
 CITY-ST-ZIP: MIAMI FL 33186

D
 TITLE: Beverley Morales Change Addition
 NAME: Beverley Morales
 STREET ADDRESS: 12841 SW 115 Terrace
 CITY-ST-ZIP: Miami, FL 33186

D
 TITLE: CABRERA, SERGIO & KELLY Delete
 NAME: CABRERA, SERGIO & KELLY
 STREET ADDRESS: 9300 HAITIAN DR
 CITY-ST-ZIP: MIAMI FL 33189

D
 TITLE: Ron Todd Change Addition
 NAME: Ron Todd
 STREET ADDRESS: 10922 SW 135 Place
 CITY-ST-ZIP: Miami, FL 33186

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Chris Stevenson, Development Director* 2/13/02 305-245-4673
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)

332427

Additions/Changes to Officers and Directors in 10

Attachment

Title	D
Name	Sara Beth Todd
Street Address	10922 SW 135 Place
City-St-Zip	Miami, FL 33186

X Addition

N36226