

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30226

FILED
Apr 02, 2007
Secretary of State

Entity Name: FIRST CHOICE WOMEN'S CENTERS, INC.

Current Principal Place of Business:

257 NORTH KROME AVE
HOMESTEAD, FL 33030 US

New Principal Place of Business:

Current Mailing Address:

257 K. KROME AVENUE
HOMESTEAD, FL 33030 US

New Mailing Address:

FEI Number: 65-0098388

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAGNELL, MAYULIS MRS.
8864 SW 176 TERRACE
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

DUNN, THOMAS G MR.
1593 FLAMINGO CT
HOMESTEAD, FL 33035 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: THOMAS GLENN DUNN

04/02/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: COB () Delete
Name: LOWRY, PALLIE MRS.
Address: 13220 SW 83 AVE
City-St-Zip: PINECREST, FL 33156

Title: S () Delete
Name: DAVIES, NANCY MRS.
Address: 18424 SW 294 TERRACE
City-St-Zip: HOMESTEAD, FL 33030

Title: VCOB () Delete
Name: RUIZ, DAVID MR
Address: 11036 SW 137 PLACE
City-St-Zip: MIAMI, FL 33186

Title: T () Delete
Name: LOWRY, PALLIE MRS.
Address: 13220 SW 83 AVE
City-St-Zip: PINECREST, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VCOB (X) Change () Addition
Name: DAHNE, JAMES MR
Address: 28595 SW 172 AVE
City-St-Zip: HOMESTEAD, FL 33030

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: THOMAS GLENN DUNN

DIR

04/02/2007

Electronic Signature of Signing Officer or Director

Date