

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30226

FILED
Mar 18, 2009
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 NORTH KROME AVE
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:

ALFIERI, PAUL R
ALFIERI AND ASSOCIATES, LLC
5143 N.W. 42ND TERRACE
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

ALFIERI AND ASSOCIATES, LLC
5143 N.W. 42ND TERRACE
COCONUT CREEK, FL 33073 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: PAUL R. ALFIERI, ESQ.

03/18/2009

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: DAHNE, JAMES MR
Address: 28595 SW 172 AVE
City-St-Zip: HOMESTEAD, FL 33030

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

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,CH (X) Change () Addition
Name: DAHNE, JIM
Address: 257 NORTH KROME AVE
City-St-Zip: HOMESTEAD, FL 33030

Title: D,VC (X) Change () Addition
Name: SASTRE,, CESAR
Address: 257 NORTH KROME AVE
City-St-Zip: HOMESTEAD, FL 33030

Title: D,S (X) Change () Addition
Name: LAGUERRE, JOSELLE
Address: 257 NORTH KROME AVE
City-St-Zip: HOMESTEAD, FL 33030

Title: D,T (X) Change () Addition
Name: PURKISS, FIONA
Address: 257 NORTH KROME AVE
City-St-Zip: HOMESTEAD, FL 33030

Title: D,ED () Change (X) Addition
Name: USTICK, SCOTT
Address: 257 NORTH KROME AVE
City-St-Zip: HOMESTEAD, FL 33030

Title: D () Change (X) Addition
Name: LOWRY, PALLIE
Address: 257 NORTH KROME AVE
City-St-Zip: HOMESTEAD, FL 33030

I hereby certify that the information supplied with this filing does not qualify 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: JIM DAHNE

CH

03/18/2009

Electronic Signature of Signing Officer or Director

Date