NONPROFIT CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 JUL -3 AM 9:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N41801 **(4)**

1. Corporation Name

YOUNG MOTHER'S LEAGUE OF ST. PETERSBURG, INC.

Principal Place of Business	Mailing Address
6838 CIR CRK DR PINELLAS PARK FL 34665 US	6838 CIR CRK DR PINELLAS PARK FL 34665 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/24/1991
3a. Date of Last Report: 05/01/1994
4. FEI Number: NOT APPLICABLE — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $0.75 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 ☐ — FILING FEE IS $61.25
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21: 333 30th Ave N
22: Suite, Apt. #, etc
23: St. Petersburg, FL
24: Zip 33704
25: County: USA

2a. Mailing Address
26: P.O. Box 7415
27: Suite, Apt. #, etc
28: St. Petersburg, FL
29: Zip 33734
30: Country: USA

9. Name and Address of Current Registered Agent

FISHER, JILL
6838 CIR CRK DR
PINELLAS PARK FL 34665

10. Name and Address of New Registered Agent

81 Name: Valerie Widner
82 Street Address (P.O. Box Number is Not Acceptable): 333 30th Ave N
83:
84 City: St. Petersburg FL 85 Zip Code: 33704

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: Valerie Widner — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '95		
TITLE	DP	11 TITLE	DP	☒ Change ☐ Addition
NAME	FISHER, JILL	12 NAME	Valerie Widner	
STREET ADDRESS	6838 CIR CRK DR	13 STREET ADDRESS	333 30th Ave N	
CITY ST ZIP	PINELLAS PARK FL	14 CITY ST ZIP	St. Petersburg, FL 33704	
TITLE	DV	21 TITLE	DV	☒ Change ☐ Addition
NAME	DOLAN, LINDA	22 NAME	Lauri Reynolds	
STREET ADDRESS	5070 SHORE ACREES BLVD NE	23 STREET ADDRESS	1132 45th Ave N	
CITY ST ZIP	ST. PETERSBURG FL	24 CITY ST ZIP	St Petersburg, FL 33703	
TITLE	DT	31 TITLE		☐ Change ☐ Addition
NAME	PORTER, TERRY	32 NAME		
STREET ADDRESS	403 HARBOR VIEW LN	33 STREET ADDRESS		
CITY ST ZIP	LARGO FL	34 CITY ST ZIP		
TITLE	DS	41 TITLE		☐ Change ☐ Addition
NAME	DUDLEY, MARY R	42 NAME		
STREET ADDRESS	1225 14 ST N	43 STREET ADDRESS		
CITY ST ZIP	ST PETERSBURG FL	44 CITY ST ZIP		
TITLE	DC	51 TITLE	DC	☒ Change ☐ Addition
NAME	PETRUCCI, ANN	52 NAME	Cathie Hirschauer	
STREET ADDRESS	1760 DELAWARE AVE NE	53 STREET ADDRESS	525 18th Ave, NE	
CITY ST ZIP	ST. PETERSBURG FL	54 CITY ST ZIP	St Petersburg FL 33704	
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

CR2E037 (3/95)

14. I do hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), 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: Theresa A Porter — Theresa A Porter — 6/21/95 — 813 584-9293

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

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