## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

(6)

FEMINIST ALTERNATIVE, INC.

## **FILED** Apr 11 1997 8:00am Secretary of State



MCNICHOLS, MEUNDA L 425 LAVILLA DR MIAMI SPRINGS FL 33166  11. Pursuant to the provisions of Sections 517 0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent a term familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. STREET ADDRESS  15. STREET ADDRE	Principal Place	e or Business	Mailing Address					·						
S. Delis ricorporated or Qualified   Sa. Date of Last Report OO/24/1981   So. Date of Last Report OO/24/1981   Applied For NOT Applied For NO				c 6006										
2. Principal Flace of Business	MIAMI SPRINGS	FL 33100	MINNI SPRINGS PL 33100	0-0053			1							
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Sulide, April 8, etc.    Sulide, April 9, etc.   Sulid	2. Principal P	ace of Business	2a. Mailino Address					4. FEI N	lumber			····	TA	olied For
Salte, April #, etc. 27 City & State City &	├── <b>┐</b>						1	t	NOT API	PLICABLE	•			·
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City & State    Country   Zip   Zip	·		27				6	5. Certii	icate of St	atus Desired	i [			
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Country   Zip   Country   Zip   Country   Zip   Substitution   S	23		28							•	ຶ 🗆			
Section   Sect		Country		Cou	intry			B. This	corporation	has liability	for intanc			
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MCNICHOLS, MELINDA L 425 LAVILLA DR MIAMI SPRINGS FL 33166  83  84  City  FL 85  Ci		9. Name and Address of Currer	nt Registered Agent				10	0. Nam	e and Add	ress of Nev	v Registe	red Ager	nt	
### Addition ### Application of 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 agent or both in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent or both in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent and agent are below named corporation submits this statement for the purpose of changing its registered agent and agent and like it appetative. (INTE Registered Agent signature regulate when remailed)  ###################################		•			81	Name								
### Addition ### Application of 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 agent or both in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent or both in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent and agent are below named corporation submits this statement for the purpose of changing its registered agent and agent and like it appetative. (INTE Registered Agent signature regulate when remailed)  ###################################	MONICH	OLS MELINDA I.			92	Ctroot	Address	/D O D	N. Number	in Mat Appe	otable)			
MIAMI SPRINGS FL 33166    63					02	Subbi	MUCHOSS !	tr.O. Di	JX MUITIDOI	IS INUL PICCE	phanel			
11. Pursuant to the provisions of Socions 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  Signature for printed name of registered agent					83									
THE DELETE SITER ADDRESS OF Sections 617 0502 and 617 1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing lis 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 and accept the obligations of, Section 617 0503, Florida Statutos.  SIGNATURE  Topic the provisions of Sections 617 0503, Florida Statutos.  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE DHENRY, CELIA  HENRY, CELIA  9002 SW. 137TH ST., #E  MIAMI FL  D WIAMI F		111110012 00100								·	····		T	<del></del>
1.1. Projection to the provisions of Sections 617 0502 and 617.1509. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its repistered agreed. 1 am familiar with, and accept the obligations of, Section 617 0503, Florida Statutes.  SIGNATURE  12. OF FICERS AND DIRECTORS  13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.  14. TITLE  15. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.  15. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.  16. TITLE  16. TITLE  17. TITLE  18. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.  18. ADDITION	1				84	City					1	8t ا	5 Zip	Code
office or registorial 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 arm familiar with, and accept the obligations of, Section 817,0503, Florida Statutes.  SIGNATURE    Total	11 Pursuant	to the provisions of Sections 617 050	12 and 617 1508 Florida State	ites the el	hove	-named	corporati	ion subi	nits this st	atement for	he purpo	se of cha	nging it	s renistered
SIGNATURE    Signature typect or period name of registered agent and site if applicable.   ONTE Registered Agent signature trequired whom remainating)   DATE	office or re	egistered agent, or both, in the State	of Florida. Such change was	authorize	d by	the corp	poration's	board	of directors	s. I hereby a	ccept the	appointr	nent as	registered
12	agent La	m familiar with, and accept the oblig	ations of, Section 617,0503, F	lorida Stat	tutes	١.								
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		ny certify that the information supplie	ed with this filing does not gue				Stated in 5	Section	119.D7/3V	). Florida St	atutes I fi	irther cer	tify 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.

Metinda L. McNichols