

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 07, 2007 8:00 am**  
**Secretary of State**

05-07-2007 90068 012 \*\*\*\*61.25

**DOCUMENT # N45862**

1. Entity Name  
**PLANNED PARENTHOOD OF GREATER ORLANDO, INC.**



Principal Place of Business  
**726 SOUTH TAMPA AVE  
ORLANDO, FL 32805 US**

Mailing Address  
**726 SOUTH TAMPA AVE  
ORLANDO, FL 32805 US**

40101200



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01262007 Chg-NP CR2E037 (12/06)

4. FEI Number  
**59-3092996**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RODMAN IDTENSOHN, SUSAN  
726 SOUTH TAMPA AVE  
ORLANDO, FL 32805**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE BCD ☐ Delete  
NAME BLACKMUN, SALLY  
STREET ADDRESS 6000 LAKE ELLENOR DR  
CITY-ST-ZIP ORLANDO, FL 32809

TITLE VP BCD ☐ Delete  
NAME LEVITT, MARA  
STREET ADDRESS 201 E. PINE STREET, 11TH FLOOR  
CITY-ST-ZIP ORLANDO, FL 32801

TITLE VP ☐ Delete  
NAME SMITHER, JANAN  
STREET ADDRESS 1120 S. LAKE SYBELIA DR.  
CITY-ST-ZIP MAITLAND, FL 32751

TITLE T ☒ Delete  
NAME ABRAMSON, SUZAN  
STREET ADDRESS 255 S. ORANGE AVENUE 17TH FLOOR  
CITY-ST-ZIP ORLANDO, FL 32801

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☐ Change ☒ Addition  
NAME KIMBERLY STERLING  
STREET ADDRESS 301 E. PINE ST, STE 300  
CITY-ST-ZIP ORLANDO, FL 32801

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:**

*Susan R. Iotensohn*

**SUSAN R. IOTENSOHN**

**4/27/07**

**407.481.0696**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #