

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N47851 ✓

1. Corporation Name

WOMEN AND CHILDREN 1ST., INC.

Principal Place of Business

19390 COLLINS AVE., #421
MIAMI BEACH FL 33160

Mailing Address

19390 COLLINS AVE., #421
MIAMI BEACH FL 33160

FILED
Sep 03, 1999 8:00 am
Secretary of State

09-03-1999 90002 017 ****70.00

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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 3575 Barrel Springs Drive		26 3575 Barrel Springs Drive		03/11/1992	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 Orange Park, FL		27 Orange Park, FL		65-0324317	
City & State		City & State		Applied For	
23		28		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 32073		29 32073		✓	
Country		Country		\$8.75 Additional Fee Required	
25 USA		30 USA		6. Election Campaign Financing	
				Trust Fund Contribution	
				5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
HOLLOMAN, MARILYN 19390 COLLINS AVE., #421 MIAMI BEACH FL 33160				81 Name HOLLOWAN, MARILYN	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				3575 Barrel Springs Drive	
				83 Orange Park	
				84 City	
				FL 85 Zip Code	
				32073	
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				DATE	
Marilyn Holloman, President/CEO				8/30/99	
Signature, typed or printed name of registered agent and title if applicable.				(NOTE: Registered Agent signature required when reinstating)	
12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE				1.1 TITLE	
NAME				1.2 NAME	
STREET ADDRESS				1.3 STREET ADDRESS	
CITY-ST-ZIP				1.4 CITY-ST-ZIP	
PT				3575 Barrel Springs Drive	
HOLLOMAN, MARILYN				Orange Park, FL 32073	
19390 COLLINS AVE., #421					
MIAMI BEACH FL 33160					
TITLE				2.1 TITLE	
NAME				2.2 NAME	
STREET ADDRESS				2.3 STREET ADDRESS	
CITY-ST-ZIP				2.4 CITY-ST-ZIP	
CEO				3575 Barrel Springs Drive	
HOLLOMAN, MARILYN				Orange Park, FL 32073	
19390 COLLINS AVE., #421					
MIAMI BEACH FL 33160					
TITLE				3.1 TITLE	
NAME				3.2 NAME	
STREET ADDRESS				3.3 STREET ADDRESS	
CITY-ST-ZIP				3.4 CITY-ST-ZIP	
SUEDI, AMINA				3575 Barrel Springs Drive	
19390 COLLINS AVE., #421				Orange Park, FL 32073	
MIAMI BEACH FL 33160					
TITLE				4.1 TITLE	
NAME				4.2 NAME	
STREET ADDRESS				4.3 STREET ADDRESS	
CITY-ST-ZIP				4.4 CITY-ST-ZIP	
STT				3575 Barrel Springs Drive	
JOHNSON, MARY				Orange Park, FL 32073	
19390 COLLINS AVE., #421					
MIAMI BEACH FL 33160					
TITLE				5.1 TITLE	
NAME				5.2 NAME	
STREET ADDRESS				5.3 STREET ADDRESS	
CITY-ST-ZIP				5.4 CITY-ST-ZIP	
TITLE				6.1 TITLE	
NAME				6.2 NAME	
STREET ADDRESS				6.3 STREET ADDRESS	
CITY-ST-ZIP				6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8/30/99 (904) 777-6983

CR2E037 (5/99)