

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49946

FILED  
May 03, 2005  
Secretary of State

**Entity Name:** FLORIDA ALLIANCE OF PLANNED PARENTHOOD AFFILIATES, INC.

**Current Principal Place of Business:**

317 EAST PARK AVE.  
TALLAHASSEE, FL 32301 US

**New Principal Place of Business:**

**Current Mailing Address:**

317 EAST PARK AVE.  
TALLAHASSEE, FL 32301 US

**New Mailing Address:**

**FEI Number:** 59-3142119 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

GRUTMAN, STEPHANIE  
317 E PARK AVE  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HIGMAN, CAROL  
Address: 622 SW 23RD PLACE  
City-St-Zip: GAINESVILLE, FL 32601

Title: VD ( ) Delete  
Name: SATERBO, MARIA  
Address: 149 WODEN WAY  
City-St-Zip: WINTER HAVEN, FL 33884

Title: SD ( ) Delete  
Name: COTTRELL, ANNA  
Address: 2597 CARANDIS ROAD  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: TD ( ) Delete  
Name: SEABROOK, BRUCE  
Address: 3564 ST GAUDENS ROAD  
City-St-Zip: COCONUT GROVE, FL 33133

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SATERBO, MARIA  
Address: 149 WODEN WAY  
City-St-Zip: WINTERHAVEN, FL 33884

Title: VD (X) Change ( ) Addition  
Name: HUCKSHORN, CAROLYN  
Address: 1221 SW 13TH PL  
City-St-Zip: BOCA RATON, FL 33486

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD ( ) Change (X) Addition  
Name: HIGMAN, CAROL  
Address: 622 SW 23RD PLACE  
City-St-Zip: GAINESVILLE, FL 32601

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARIA SATERBO

PD

05/03/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date