

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49946

FILED
Jul 14, 2006
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:

2300 N FLORIDA MANGO ROAD
WEST PALM BEACH, FL 33409 US

Current Mailing Address:

317 EAST PARK AVE.
TALLAHASSEE, FL 32301 US

New Mailing Address:

2300 N FLORIDA MANGO ROAD
WEST PALM BEACH, FL 33409 US

FEI Number: 59-3142119 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

GRUTMAN, STEPHANIE
2300 N FLORIDA MANGO ROAD
WEST PALM BEACH, FL 33409 US

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: STEPHANIE GRUTMAN

07/14/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: BROWN, CYNTHIA
Address: 1744 S OCEAN BLVD
City-St-Zip: PALM BEACH, FL 33480

Title: TD (X) Change () Addition
Name: SELZER, JUDITH
Address: 455 NW 35TH STREET
City-St-Zip: BOCA RATON, FL 33431

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: STEPHANIE GRUTMAN

ED

07/14/2006

Electronic Signature of Signing Officer or Director

Date