2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49946

FILED Feb 22, 2011 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

522 E. PARK AVE. SUITE 100

TALLAHASSEE, FL 32301 US

Current Mailing Address: New Mailing Address:

736 CENTRAL AVENUE SARASOTA, FL 34236 US

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

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

KUNKEL, STEPHANIE 522 E. PARK AVE. SUITE 100

TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: TAMAYO, LILLIAN

Address: 522 E. PARK AVE., SUITE 100 City-St-Zip: TALLAHASSEE, FL 32301

Title: VP

Name: WENDEL, CHAR

Address: 522 E. PARK AVE., SUITE 100 City-St-Zip: TALLAHASSEE, FL 32301

Title: TF

Name: FOX, STACI

Address: 522 E. PARK AVE., SUITE 100 City-St-Zip: TALLAHASSEE, FL 32301

Title:

Name: IDTENSOHN, SUE

Address: 522 E. PARK AVE., SUITE 100 City-St-Zip: TALLAHASSEE, FL 32301

Title: IPF

 Name:
 ZDRAVECKY, BARBARA

 Address:
 522 E. PARK AVE., SUITE 100

 City-St-Zip:
 TALLAHASSEE, FL 32301

Title: ED

 Name:
 KUNKEL, STEPHANIE

 Address:
 522 E. PARK AVE., SUITE 100

 City-St-Zip:
 TALLAHASSEE, FL 32301

I hereby 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 all other like empowered.

SIGNATURE: STEPHANIE KUNKEL ED 02/22/2011