

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000003373

1. Entity Name

WOMEN AGAINST RAPE & VIOLENCE, INC.

FILED
Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90019 045 ****70.00

Principal Place of Business

201 PENSACOLA BEACH ROAD, SUITE A-8
 GULF BREEZE FL 32561

Mailing Address

201 PENSACOLA BEACH ROAD, SUITE A-8
 GULF BREEZE FL 32561

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

3543 BAYOU BLVD.

Suite, Apt. #, etc.

P.O. BOX 1531

City & State

PENSACOLA, FL

City & State

GULF BREEZE, FL

Zip

32503

Country

Zip

32562

Country

4. FEI Number

59-3516110

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

POFF, KATIE C

201 PENSACOLA BEACH ROAD, SUITE A-8
 GULF BREEZE FL 32561

7. Name and Address of New Registered Agent

Name

KATIE GONZALEZ

Street Address (P.O. Box Number is Not Acceptable)

3543 BAYOU BLVD.

City

PENSACOLA

FL

Zip Code

32503

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

KATIE GONZALEZ 7/31/00

FILE NOW: FEE IS \$61.25
 After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
 NAME POFF, KATIE C
 STREET ADDRESS 201 PENSACOLA BEACH ROAD, SUITE A-8
 CITY-ST-ZIP GULF BREEZE FL 32561

TITLE VD ☒ Delete
 NAME POFF, PATRICK R
 STREET ADDRESS 201 PENSACOLA BEACH ROAD, SUITE A-8
 CITY-ST-ZIP GULF BREEZE FL 32561

TITLE SD ☒ Delete
 NAME HERKEL, STEPHANIE
 STREET ADDRESS 616 WEST WILLIAMS ST. SUITE A-8
 CITY-ST-ZIP KENDALLVILLE IN 48755-1663

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 PD ☒ Change ☐ Addition
 NAME KATIE GONZALEZ
 STREET ADDRESS 3543 BAYOU BLVD
 CITY-ST-ZIP PENSACOLA, FL 32503

TITLE VD ☒ Change ☐ Addition
 NAME LEONARD P. GONZALEZ JR.
 STREET ADDRESS 3543 BAYOU BLVD
 CITY-ST-ZIP PENSACOLA, FL 32503

TITLE SD ☒ Change ☐ Addition
 NAME REBECCA K. HERKEL
 STREET ADDRESS 8124 GLEN BROOK PL.
 CITY-ST-ZIP SARASOTA, FL 34243

TITLE ☐ Change ☒ Addition
 NAME CATHY HANNAH
 STREET ADDRESS 3543 BAYOU BLVD.
 CITY-ST-ZIP PENSACOLA, FL 32503

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

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

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 contained 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 I am, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Leonard Patrick Gonzalez Jr.*

SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

Date

Daytime Phone #

LEONARD PATRICK GONZALEZ JR. 7/31/00

CR2 0:17 (5/00)