

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000007372

**FILED**  
**Apr 01, 2010**  
**Secretary of State**

**Entity Name:** WOMEN'S RESOURCE CENTER FOUNDATION OF MANATEE, INC.

**Current Principal Place of Business:**

1926 MANATEE AVE. W.  
BRADENTON, FL 34205 US

**New Principal Place of Business:**

**Current Mailing Address:**

1926 MANATEE AVE. W.  
BRADENTON, FL 34205 US

**New Mailing Address:**

**FEI Number:** 59-3034653

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWN, ASHLEY  
1926 MANATEE AVE. W.  
BRADENTON, FL 34205 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: P  
Name: CASON, CAROL  
Address: 4911 CORAL BLVD.  
City-St-Zip: BRADENTON, FL 34210 US

Title: S  
Name: BOLEK, MARILYNNE  
Address: 1401 8TH AVE. W.  
City-St-Zip: BRADENTON, FL 34205 US

Title: VP  
Name: CANNON, KATHLEEN  
Address: 7366 52ND PLACE E.  
City-St-Zip: BRADENTON, FL 34203

Title: T  
Name: HOPPER, KIM  
Address: 1626 RINGLING BLVE., SUITE 200  
City-St-Zip: SARASOTA, FL 34236

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: ASHLEY BROWN

ED

04/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date