

**2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# N03000005476

Entity Name: ALLIANCE OF WOMEN COACHES, INC.

Current Principal Place of Business:

65 WASHINGTON ST
#237
SANTA CLARA, CA 95050

Current Mailing Address:

65 WASHINGTON ST
#237
SANTA CLARA, CA 95050 US

FEI Number: 20-0059540

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEAN MEAD SERVICES, LLC
800 N. MAGNOLIA AVE., STE. 1500
ORLANDO, FL 32803 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

Officer/Director Detail :

Title PRESIDENT, BOARD OF DIRECTORS
Name REYNAUD, CECILE DR.
Address 7071 OX BOW RD
City-State-Zip: TALLAHASSEE FL 32312

Title TREASURER, BOARD OF DIRECTORS
Name DOLSON, KELLY
Address 52 SCHOOLHOUSE RD
City-State-Zip: MIDDLETOWN NY 10940

Title SECRETARY, BOARD OF DIRECTORS
Name HESSE, HOLLY
Address 2333B W CHESTERFIELD BLVD
City-State-Zip: SPRINGFIELD MO 65807

Title DIRECTOR, BOARD OF DIRECTORS
Name IRVINE, LESLEY
Address 1529 TREETOP PL
City-State-Zip: BOWLING GREEN OH 43402

Title DIRECTOR, BOARD OF DIRECTORS
Name LAVOI, NICOLE
Address 408 N 1ST ST #304
City-State-Zip: MINNEAPOLIS MN 55401

Title DIRECTOR, BOARD OF DIRECTORS
Name ROE LACH, JULIE
Address 11821 EDEN GLEN
City-State-Zip: CARMEL IN 46033

Title DIRECTOR, BOARD OF DIRECTORS
Name SPARKS, ROBIN
Address 60 HARDEN ST
City-State-Zip: HAMDEN CT 06518

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: CECILE REYNAUD

**PRESIDENT, BOARD OF 05/15/2015
DIRECTORS**

Electronic Signature of Signing Officer/Director Detail

Date

