

**2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# N07310

**Entity Name:** AID TO VICTIMS OF DOMESTIC ABUSE, INC.

**Current Principal Place of Business:**

2905 S FEDERAL HWY  
SUITE C9/C10  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

P. O. BOX 6161  
DELRAY BEACH, FL 33482 US

**FEI Number:** 59-2486620

**Certificate of Status Desired:** Yes

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

FOLEY, JOHN AESQ  
423 FERN STREET  
SUITE 200  
WEST PALM BEACH, FL 33401 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 CHAIRMAN  
Name BABIJ, TAMI  
Address 2905 S FEDERAL HWY  
SUITE C9/C10  
City-State-Zip: DELRAY BEACH FL 33483

Title TREASURER  
Name CORDNER, BEVERLY  
Address 2905 S. FEDERAL HIGHWAY  
City-State-Zip: DELRAY BEACH FL 33483

Title VC  
Name CORDNER, BEVERLY  
Address 2905 S FEDERAL HWY  
SUITE C9/C10  
City-State-Zip: DELRAY BEACH FL 33483

Title SECRETARY  
Name MAGRELLA, JEAN  
Address 2905 S. FEDERAL HIGHWAY  
City-State-Zip: DELRAY BEACH FL 33483

Title VC  
Name DEORCHIS, JEANNETTE  
Address 2905 S. FEDERAL HIGHWAY  
City-State-Zip: DELRAY BEACH FL 33483

*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:** TAMI BABIJ

**BOARD CHAIR**

**07/07/2017**

Electronic Signature of Signing Officer/Director Detail

Date