## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000006041

Entity Name: ST. GIANNA'S CENTER FOR WOMEN'S HEALTH AND

FERTILITYCARE, INC.

**Current Principal Place of Business:** 

12360 66TH ST. N, STE C2-C3 LARGO, FL 33773

**Current Mailing Address:** 

PO BOX 12691

SAINT PETERSBURG, FL 33733

FEI Number: 27-0397158 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOE, EMMA 18304 HANCOCK BLUFF RD DADE CITY, FL 33523 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: EMMA BOE 01/24/2016

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title D Title D

NameHALE, DIANE MNameGRAMLICH, DEBRA SAddress8199 HOPEWELL CTAddress9127 MAPLE CT.City-State-Zip:SEMINOLE FL 33777City-State-Zip:LARGO FL 33777

 Title
 D
 Title
 DIRECTOR

 Name
 TOZIER, CYNTHIA
 Name
 BOE, EMMA

Address 3325 SCHEFFLERA RD Address 18304 HANCOCK BLUFF DR
City-State-Zip: TAMPA FL 33618 City-State-Zip: DADE CITY FL 33523

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: CYNTHIA TOZIER

**TREASURER** 

01/24/2016

FILED Jan 24, 2016

**Secretary of State** 

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