

2019 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**04/11/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	D	Title	D
Name	GRAMLICH, DEBRA S	Name	TOZIER, CYNTHIA
Address	9127 MAPLE CT.	Address	3325 SCHEFFLER RD
City-State-Zip:	LARGO FL 33777	City-State-Zip:	TAMPA FL 33618
Title	DIRECTOR		
Name	BOE, EMMA		
Address	18304 HANCOCK BLUFF DR		
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****04/11/2019**

Electronic Signature of Signing Officer/Director Detail

Date