

2015 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

02/28/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name HALE, DIANE M
Address 8199 HOPEWELL CT
City-State-Zip: SEMINOLE FL 33777

Title D
Name GRAMLICH, DEBRA S
Address 9127 MAPLE CT.
City-State-Zip: LARGO FL 33777

Title D
Name TOZIER, CYNTHIA
Address 3325 SCHEFFLER RD
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

02/28/2015

Electronic Signature of Signing Officer/Director Detail

Date