

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000001580

Entity Name: THE BETTY ALLEN GYNECOLOGIC CANCER FOUNDATION, INC.**FILED**
Apr 26, 2023
Secretary of State
6858784192CC**Current Principal Place of Business:**18170 PARKRIDGE CIRCLE
FT MYERS, FL 33908**Current Mailing Address:**18170 PARKRIDGE CIRCLE
FT MYERS, FL 33908 US**FEI Number: 27-4847591****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**KEARNS, SHARIE
18170 PARKRIDGE CIRCLE
FT MYERS, FL 33908 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	PD
Name	KEARNS, SHARIE ALLEN
Address	18170 PARKRIDGE CIRCLE
City-State-Zip:	FT MYERS FL 33908

Title	VT
Name	STEVENS , NICOLE LAQUIS
Address	13100 PONDEROSA WAY
City-State-Zip:	FT. MYERS FL 33907

Title	S
Name	RICHARDS, KAREN A
Address	16721 CABREO DRIVE
City-State-Zip:	NAPLES FL 34110

Title	TREASURER
Name	HOOVER, MICHELE M CPA
Address	18170 PARKRIDGE CIRCLE
City-State-Zip:	FT MYERS FL 33908

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: KEARNS , SHARIE ALLEN**PD****04/26/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date