

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

DOCUMENT# N11000010940

**Entity Name:** WOMEN'S CARE CENTER OF IRC, INC.**Current Principal Place of Business:**1986 31ST AVENUE, SUITE 100  
VERO BEACH, FL 32960**Current Mailing Address:**1986 31ST AVENUE, SUITE 100  
VERO BEACH, FL 32960**FEI Number:** 46-0692758**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THE LAW OFFICES OF JOHN E. MOORE, III PLLC  
3240 CARDINAL DRIVE, SUITE 200  
VERO BEACH, FL 32963 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:** JOHN E. MOORE, III

01/25/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            FREDERICK, THOMAS A  
Address        1605 MAJORCA PLACE  
City-State-Zip: VERO BEACH FL 32967

Title            TREASURER  
Name            RORICK, JOHN F  
Address        5158 FORMOSA CIR  
City-State-Zip: VERO BEACH FL 32967

Title            DIRECTOR  
Name            TOBIN, KAYLEE  
Address        1301 WELCOME DRIVE  
City-State-Zip: VERO BEACH FL 32966

Title            DIRECTOR  
Name            LYONS, MARGARET  
Address        500 BEACH ROAD  
City-State-Zip: VERO BEACH FL 32963

Title            DIRECTOR  
Name            MACKETT, MICHELE M  
Address        955 REEF ROAD  
City-State-Zip: VERO BEACH FL 32963

Title            DIRECTOR  
Name            VAN MELE, RICHARD  
Address        781 GEORGE STREET  
City-State-Zip: SEBASTIAN FL 32958

Title            DIRECTOR  
Name            BRENNAN, ANITA  
Address        596 OCEAN ROAD  
City-State-Zip: VERO BEACH FL 32963

Title            DIRECTOR  
Name            ROSS, GEORGE ALEXANDER  
Address        1310 LITTLE HARBOUR DRIVE  
City-State-Zip: VERO BEACH FL 32963

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*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:** JOHN RORICK

TREASURER

01/25/2017

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name CORR, CAROL  
Address 235 SAGO PALM LANE  
City-State-Zip: VERO BEACH FL 32963

Title DIRECTOR  
Name CARNELL, RICHARD  
Address 1911 CLUB DRIVE  
City-State-Zip: VERO BEACH FL 32963

Title DIRECTOR  
Name SCOTT, M.D., MICHAELA  
Address 1926 OCEAN DRIVE  
City-State-Zip: VERO BEACH FL 32963

Title SECRETARY  
Name MANGULAS, FRIEDA  
Address 1725 71ST AVENUE  
City-State-Zip: VERO BEACH FL 32966