

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000010649

Entity Name: WOMENS EQUAL PAY NETWORK CORPORATION

Current Principal Place of Business:

15 SE 9 AVE
FT LAUD, FL 33301

Current Mailing Address:

15 SE 9 AVE
FT LAUD, FL 33301

FEI Number: 47-2328126

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OLEFSON, SHARI
15 SE 9 AVE
FT LAUD, FL 33301 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 P
Name OLEFSON, SHARI
Address 15 SE 9 AVE
City-State-Zip: FT LAUD FL 33301

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: SHARI OLEFSON

DIRECTOR

03/01/2016

Electronic Signature of Signing Officer/Director Detail

Date