2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2018
Secretary of State
CC6550915221

DOCUMENT# N16000008614

Entity Name: WOMEN'S LEADERSHIP ALLIANCE, INC.

Current Principal Place of Business:

131 2ND AVE NORTH, SUITE 200
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

131 2ND AVE NORTH, SUITE 200
JACKSONVILLE BEACH, FL 32250 US

FEI Number: 81-3732234

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CARTER, MARY
131 2ND AVE NORTH, SUITE 200
JACKSONVILLE BEACH, FL 32250 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	DV
Name	CARTER, MARY
Address	131 2ND AVE NORTH, SUITE 200
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	DVS
Name	MCGEE, JUDITH
Address	12455 SW 68TH AVENUE
City-State-Zip:	PORTLAND OR 97223

Title	D, V
Name	PAGE, DANIELLE
Address	165 TOWNSHIP LINE RD #1500
City-State-Zip:	JENKINTOWN PA 19046

Title	D, V
Name	MILLER, KATHLEEN
Address	11 TENTH AVENUE
City-State-Zip:	KIRKLAND WA 98033

Title	DV
Name	STEPHENS, SHERRI
Address	131 2ND AVE NORTH, SUITE 200
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	DV
Name	STARNER, MARGARET
Address	2525 PONCE DE LEON BOULEVARD, SUITE
City-State-Zip:	CORAL GABLES FL 33134

Title	DP
Name	BLESSING, KALITA
Address	8117 PRESTON ROAD, SUITE 700
City-State-Zip:	DALLAS TX 75225

Title	D, V
Name	SCHON, COLLEEN
Address	20 WASHINGTON STREET #1
City-State-Zip:	VILLAGE OF CLARKSTON MI 48346

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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: MICHELLE DANIELSON EXECUTIVE DIRECTOR 02/26/2018

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	D, TREASURER
Name	VAUGHN, TRACY
Address	2101 SE US HIGHWAY 19
City-State-Zip:	CRYSTAL RIVER FL 34229

Title	OTHER
Name	DANIELSON, MICHELLE
Address	18209 KEYSTONE GROVE BLVD
City-State-Zip:	ODESSA FL 33556

Title	DV
Name	LAW, SALLY
Address	6111 TULANE AVENUE
City-State-Zip:	GLEN ECHO MD 20812