

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000004500

Entity Name: SAPPHIRE WOMAN PATHWAYS, INC**Current Principal Place of Business:**6675 38TH AVE N
SUITE 102
ST PETERSBURG, FL 33710**Current Mailing Address:**6675 38TH AVE N
SUITE 102
ST PETERSBURG, FL 33710**FEI Number:** 85-0844119**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**EAST, CARLEAH
13207 49TH LN E
PARRISH, FL 34219 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	PRES
Name	EAST, CARLEAH
Address	13207 49TH LN E
City-State-Zip:	PARRISH FL 34219

Title	VP
Name	DE JESUS, ADA
Address	752 36 AVE S
City-State-Zip:	ST PETERSBURG FL 33705

Title	SEC
Name	WILLIAMS, KAREN
Address	4389 TROUT DR SE
City-State-Zip:	ST PETERSBURG FL 33705

Title	TRES
Name	ROUNDTREE, LAKEISHA
Address	6801 THRASHER DR
City-State-Zip:	TAMPA FL 33610

Title	BOAR
Name	SNEAD, TIQUILA
Address	4053 18TH AVE S
City-State-Zip:	ST PETERSBURG FL 33711

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: DR. CARLEAH EAST**PRESIDENT****03/04/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date