

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002562

Entity Name: FIRST COAST WOMEN'S SERVICES, INC.**Current Principal Place of Business:**3475 KERNAN BLVD S
JACKSONVILLE, FL 32224**Current Mailing Address:**3475 KERNAN BLVD S
JACKSONVILLE, FL 32224 US**FEI Number:** 59-3200240**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PACE, JENNIFER R
1219 FOXMEADOW TRAIL
MIDDLEBURG, FL 32068 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:** JENNIFER R PACE

01/29/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name WEBER, JUDY S
Address 124 33RD AVE S
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title TREASURER
Name GRIGGS, ERIC
Address 932 FIRST ST NORTH
APT 602
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title CHAIRMAN
Name ATLEE, KEN
Address 5213 ORTEGA OAKS LANE
City-State-Zip: JACKSONVILLE FL 32210

Title VC
Name ALIPRANDO, VICTOR
Address 20 KENMORE AVE
City-State-Zip: PONTE VEDRA FL 32081

Title SECRETARY, DIRECTOR
Name KNIGHT, ELIZABETH
Address 3475 KERNAN BLVD S
City-State-Zip: JACKSONVILLE FL 32224

Title DIRECTOR
Name GARSIDE, KRISTI
Address 716 PROMENADE POINT DR
City-State-Zip: ST AUGUSTINE FL 32095

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: JUDY S WEBER**DIRECTOR**

01/29/2025

Electronic Signature of Signing Officer/Director Detail

Date