

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004049

FILED
Apr 25, 2014
Secretary of State
CC1598542133

Entity Name: INSTITUTE OF WOMEN'S HEALTH OF NORTH AMERICA, INC.

Current Principal Place of Business:

609 VIRGINIA DRIVE
ORLANDO, FL 32803

Current Mailing Address:

609 VIRGINIA DRIVE
ORLANDO, FL 32803

FEI Number: 58-3460858

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMALLEY & COMPANY, PL
1517 EAST HILLCREST ST
ORLANDO, FL 32803 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 PD
Name PENDERGRAFT IV, JAMES SMD
Address 609 VIRGINIA DRIVE
City-State-Zip: ORLANDO FL 32803

Title D
Name SMALLEY, WAYNE
Address 1517 EAST HILLCREST STREET
City-State-Zip: ORLANDO FL 32803

Title D
Name WEATHERFORD, WILLIAM ESQ
Address 1150 LOUISIANA AVE, SUITE 4
City-State-Zip: WINTER PARK FL 32790

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: JAMES S PENDERGRAFT IV MD

PD

04/25/2014

Electronic Signature of Signing Officer/Director Detail

Date