

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 730196

FILED
Apr 17, 2003
Secretary of State

Entity Name: PREGNANCY HELP AND INFORMATION CENTER, INC.

Current Principal Place of Business:

1126 EAST TENNESSEE ST.
TALLAHASSEE, FL 323086912

New Principal Place of Business:

Current Mailing Address:

1126 EAST TENNESSEE ST.
TALLAHASSEE, FL 323086912

New Mailing Address:

FEI Number: 59-1745861

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARFEL, TIMOTHY J.
3748 FORSYTHE WAY
TALLAHASSEE, FL 32308

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: COTTRELL, BARBARA
Address: 3062 SHAMROCK NORTH
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: BROOKS,KELLY,
Address: 2380 RYAN PLACE
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: WARFEL, TIMOTHY J.,
Address: 3748 FORSYTHE WAY
City-St-Zip: TALLAHASSEE, FL

Title: TD () Delete
Name: JOHNSON,MALLARD, VERSIE
Address: 4678 PIMLICO DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: DE () Delete
Name: KIRSCHKE, JIM
Address: 3163 FERNSGLEN DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: FIERRO,BOB,
Address: 2855 ASBURY HILL
City-St-Zip: TALLAHASSEE, FL 32312

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TIMOTHY WARFEL

D

04/17/2003

Electronic Signature of Signing Officer or Director

Date