

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Oct 17, 2008  
Secretary of State**

DOCUMENT# N09770

**Entity Name:** PREGNANCY CRISIS CENTER OF LAKE CITY, INC.**Current Principal Place of Business:**227 SW COLUMBIA AVE.  
LAKE CITY, FL 32025 US**New Principal Place of Business:****Current Mailing Address:**227 SW COLUMBIA AVE.  
LAKE CITY, FL 32025 US**New Mailing Address:**227 S W COLUMBIA AVE  
LAKE CITY, FL 32025 US

FEI Number: 59-2553369

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**FULGHUM, WORTH  
8638 127TH DRIVE  
LIVE OAK, FL 32060 US**Name and Address of New Registered Agent:**WESTER, JOHN  
227 S.W COLUMBIA AVE  
LAKE CITY, FL 32025 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: JOHN WESTER

10/17/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: D ( ) Delete  
Name: HEEKE, ROBERT  
Address: 1040 LAKE MONTGOMERY AVE.  
City-St-Zip: LAKE CITY, FL 32025Title: D ( ) Delete  
Name: ROSS, JEAN  
Address: 14323 CR 252  
City-St-Zip: LIVE OAK, FL 32060Title: T ( ) Delete  
Name: SCOTT, SUSAN  
Address: 1535 NW NOEGEL RD  
City-St-Zip: LAKE CITY, FL 32055Title: S/D ( ) Delete  
Name: TERRIE, WESTER  
Address: 5844 57 DR  
City-St-Zip: LIVE OAK, FL 32060Title: D ( ) Delete  
Name: WORTH, FULGHUM  
Address: 8638 127TH DRIVE  
City-St-Zip: LIVE OAK, FL 32060Title: DC ( ) Delete  
Name: WESTER, JOHN  
Address: 5844 57 DR  
City-St-Zip: LIVE OAK, FL 32060**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: D (X) Change ( ) Addition  
Name: BALLOU, SID  
Address: 14265 177TH ROAD  
City-St-Zip: LIVE OAK,, FL 32060Title: S/D (X) Change ( ) Addition  
Name: TERRIE, WESTER  
Address: 5844 57TH DR  
City-St-Zip: LIVE OAK, FL 32060Title: D (X) Change ( ) Addition  
Name: BALLOU, DOREEN  
Address: 14265 177TH ROAD  
City-St-Zip: LIVE OAK, FL 32060Title: P/D (X) Change ( ) Addition  
Name: WESTER, JOHN  
Address: 5844 57TH DRIVE  
City-St-Zip: LIVE OAK, FL 32060

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOHN WESTER

PRES

10/17/2008

Electronic Signature of Signing Officer or Director

Date