2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47015

FILED Jul 03, 2006 Secretary of State

Entity Name: PREGNANCY CARE CENTER OF PLANT CITY, INC.

Current Principal Place of Business: New Principal Place of Business:

304 NORTH COLLINS STREET PLANT CITY, FL 33563

Current Mailing Address: New Mailing Address:

PO BOX 2552 PLANT CITY, FL 33564

FEI Number: 59-3139161 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MORRIS, STEPHEN T GRANGER, DOUGLAS A 503 N. PALMER STREET 304 N. COLLINS STREET PLANT CITY, FL 33563 US PLANT CITY, FL 33563 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: DOUGLAS A GRANGER, CPA 07/03/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: P () Delete Title: P (X) Change () Addition

 Name:
 VINSON, PHIL
 Name:
 JONES, LANE

 Address:
 4019 MOORES LAKE RD.
 Address:
 7218 CENTERBROOK DR

 City-St-Zip:
 DOVER, FL 33527
 City-St-Zip:
 LAKELAND, FL 33809

Title: S () Delete Title: S (X) Change () Addition

 Name:
 FISHER, TERRI
 Name:
 SALMON, DONNA

 Address:
 14401 WALDEN SHEFFIELD
 Address:
 3506 AUSTIN TRAIL LANE

 City-St-Zip:
 DOVER, FL 33527
 City-St-Zip:
 PLANT CITY, FL 33565

Title: D () Delete Title: VD (X) Change () Addition Name: MALLARE-PIKE, TINA Name: VINSON, PHIL

 Address:
 2604 CLUBHOUSE DR.
 Address:
 4019 MOORES LAKE RD

 City-St-Zip:
 PLANT CITY, FL 33566
 City-St-Zip:
 DOVER, FL 33527

Title: TD () Delete Title: TD (X) Change () Addition Name: GRANGER, DOUGLAS W Name: GRANGER, DOUGLAS A CPA

Address: 201 DORT STREET, STE. A Address: 201 DORT STREET, STE. A City-St-Zip: PLANT CITY, FL 33563 City-St-Zip: PLANT CITY, FL 33563

Name: MORRIS, STEVE Name: FISHER, TERRI

Address: 3358 SILVER MOON DR. Address: 14401 WALDEN SHEFFIELD

City-St-Zip: PLANT CITY, FL 33566 City-St-Zip: DOVER, FL 33527

Title: VD () Delete Title: D (X) Change () Addition

 Name:
 JONES, LANÉ
 Name:
 BENDER, BILLÉ REV

 Address:
 7218 CENTERBROOK DR
 Address:
 6104 BARTON ROAD

 City-St-Zip:
 LAKELAND, FL 33809
 City-St-Zip:
 PLANT CITY, FL 33565

I hereby certify that the information supplied with this filing does not qualify for the 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: DOUGLAS A GRANGER TD 07/03/2006