

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90157 035 *****61.25

DOCUMENT # N97000000704

1. Entity Name

LIFE CHOICE CRISIS PREGNANCY CENTER, INC.



Principal Place of Business

**10611 TAMiami TRAIL N
STE. B2
NAPLES FL 34108
US**

Mailing Address

**10611 TAMiami TRAIL N
STE B2
NAPLES FL 34108
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BLOCK, ROBERT E
8154 LOWBANK DRIVE
NAPLES FL 34109**

7. Name and Address of New Registered Agent

Name

Nancy Diller

Street Address (P.O. Box Number is Not Acceptable)

12423 Collier's Reserve Drive

City

Naples

FL

Zip Code

34110

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Nancy Diller**
Signature, typed or printed name of registered agent and title if applicable.

Nancy Diller

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	☒ Delete
NAME	BLOCK, ROBERT E	
STREET ADDRESS	8154 LOWBANK DRIVE	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	D	☐ Delete
NAME	BEYER, DIANE M	
STREET ADDRESS	3953 DEEP PASSAGE WAY	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	D	☒ Delete
NAME	GOULD, NANCY	
STREET ADDRESS	8147 WILSHIRE LAKES BLVD.	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	D	☐ Delete
NAME	DILLER, NANCY	
STREET ADDRESS	12423 COLLIER'S RESERVE DR	
CITY-ST-ZIP	NAPLES FL 34110	
TITLE	D	☐ Delete
NAME	PHELPS, LOIS	
STREET ADDRESS	7557 CORDOBA CIRCLE	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	D	☒ Delete
NAME	DEAUGELIS, JOHN	
STREET ADDRESS	2316 HARRIER RUN	
CITY-ST-ZIP	NAPLES FL 34105	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	☐ Change ☒ Addition
NAME	Noover, Carolyn	
STREET ADDRESS	826 Anchor Road Dr.	
CITY-ST-ZIP	Naples, FL 34103	
TITLE	D	☐ Change ☒ Addition
NAME	David Miller	
STREET ADDRESS	4260 Longshore Way S	
CITY-ST-ZIP	Naples, FL 34109	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**

4-14-03

CR2E037 (10/02)