

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03843

**Entity Name:** PREGNANCY RESOURCES, INC.

**Current Principal Place of Business:**

1678 W. HIBISCUS BLVD, SUITE 102  
MELBOURNE, FL 32901

**Current Mailing Address:**

PO BOX 120478  
MELBOURNE, FL 32912 US

**FEI Number:** 59-2542341

**Certificate of Status Desired:** No

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

EVANS, LINDA  
1678 W. HIBISCUS BLVD, SUITE 102  
MELBOURNE, FL 32901 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:** LINDA EVANS

03/14/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VICE-PRESIDENT  
Name GRAFF, LYNETTE  
Address PO BOX 120478  
City-State-Zip: MELBOURNE FL 32912

Title PRESIDENT  
Name EVANS, LINDA  
Address PO BOX 120478  
City-State-Zip: MELBOURNE FL 32912

Title SECRETARY  
Name MILLER, JUDY  
Address PO BOX 120478  
City-State-Zip: MELBOURNE FL 32912

Title BOARD MEMBER  
Name ROBERTSON, JASON  
Address PO BOX 120478  
City-State-Zip: MELBOURNE FL 32912

Title TREASURER  
Name VAN SOMEREN, MATT  
Address PO BOX 120478  
City-State-Zip: MELBOURNE FL 32912

*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:** LINDA EVANS

**BOARD PRESIDENT**

03/14/2024

Electronic Signature of Signing Officer/Director Detail

Date