

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000009507

**Entity Name:** THE PREGNANCY CENTER OF GADSDEN COUNTY, INC.

**Current Principal Place of Business:**

116 E 6TH AVE  
HAVANA, FL 32333

**Current Mailing Address:**

PO BOX 573  
HAVANA, FL 32333

**FEI Number: 45-3687829**

**Certificate of Status Desired: Yes**

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

ERSKINE, ERIC R  
220 COUNTRY CLUB DR  
HAVANA, FL 32333 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name ERSKINE, ERIC R  
Address 220 COUNTRY CLUB DR  
City-State-Zip: HAVANA FL 32333

Title VP  
Name GAY, KIMBERLY  
Address PO BOX 573  
City-State-Zip: HAVANA FL 32333

Title ST  
Name HUTCHESON, CAROL  
Address 573 GOULD RD  
City-State-Zip: QUINCY FL 32351

*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: ERIC R. ERSKINE**

**PRESIDENT**

**03/27/2014**

Electronic Signature of Signing Officer/Director Detail

Date