2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 731047

Sep 12, 2002 Secretary of State

Entity Name: EMERGENCY PREGNANCY SERVICES OF JACKSONVILLE, INC.

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

1555 OAK STREET

JACKSONVILLE, FL 32204

Current Mailing Address: New Mailing Address:

1555 OAK STREET JACKSONVILLE, FL 32204

FEI Number: 59-1728087 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

STELMA, JOSEPH J RILLSTONE, JERE 1149 SECOND ST

3628 SHAWNEE SHORES DR. JACKSONVILLE BCH, FL 32250 US JACKSONVILLE, FL 32225

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: JERE RILLSTONE 09/12/2002

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

HESS, DAVID RILLSTONE, JERE Name: Name: 3295 OLD BARN RD E Address: 1301 RIVERPLACE BLVD. SUITE 1904 Address:

City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: JACKSONVILLE, FL 32207

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

Name: STELMA, JOSEPH J Name: DAVIS, DANIEL

Address: 1149 SECOND ST Address: 10230 MANORVILLE DRIVE City-St-Zip: JACKSONVILLE BCH, FL 32250 City-St-Zip: JACKSONVILLE, FL 32221

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

LETELLIER, DONNA Name: MILLER, MARK Name:

6 EAST BAT ST. SUITE 550 Address: 1700 FIRST ST Address: City-St-Zip: NEPTUNE BEACH, FL 32233 City-St-Zip: JACKSONVILLE, FL 32220

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JERE RILLSTONE Ρ 09/12/2002