2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2012
Secretary of State

DOCUMENT# 731047

Entity Name: EMERGENCY PREGNANCY SERVICES OF JACKSONVILLE, INC.

Current Principal Place of Business:

1637 KING STREET
JACKSONVILLE, FL 32204

New Principal Place of Business:

Current Mailing Address:

1637 KING STREET
JACKSONVILLE, FL 32204

New Mailing Address:

FEI Number: 59-1728078 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EMERGENCY PREGNANCY SERVICES
1637 KING STREET
JACKSONVILLE, FL 32204 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PRES
Name: GOOD, GEORGE
Address: 3804 MCGIRTS BLVD
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: TRES
Name: ALLEN, KENNETH A
Address: 7014 A. C. SKINNER PKWY SUITE 290
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: VP
Name: MOORE, PETER
Address: 4662 LONGBOW ROAD S.
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: SEC
Name: BROOKS, VIRGINIA ANN SISTER
Address: 1878 KING STREET
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: EX D
Name: CRITTENDEN, SUZANNE
Address: 1637 KING STREET
City-St-Zip: JAKSONVILLE, FL 32204

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: MELISSA A. KENNEDY DO 04/05/2012

Electronic Signature of Signing Officer or Director — Date