2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 28, 2001 8:00 am DOCUMENT # 762523 **Secretary of State** 1. Entity Name 02-28-2001 90016 046 ****61.25 PINELLAS COUNTY RIGHT TO LIFE, INC. Principal Place of Business Mailing Address 507 S.PROSPECT AVENUE 507 S.PROSPECT AVENUE CLEARWATER FL 33756 CLEARWATER FL 33756 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2181412 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HALISKY, JAN G **507 SOUTH PROSPECT AVENUE CLEARWATER FL 33756** City Zip Code FL 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 **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: Make Check Payable to \$5.00 May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Addition TITLE K Delete TITLE ☐ Change TALSNESS, PATRICIA NAME NAME Akers, Maura STREET ADDRESS STREET ADDRESS 426 C 2ND AVE 880 Mandalay Avenue, #412 South CITY-ST-ZIP CITY-ST-ZIP **DUNEDIN FL 34698** Clearwater Beach, FL 33767 TITLE ☐ Delete TITLE ★ Change ☐ Addition NAME HALISKY, JAN G NAME Talsness, Patricia STREET ADDRESS 305 ORANGEWOOD AVE STREET ADDRESS 426 C 2nd Avenue CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL 34615** Dunedin, FL 34698 ☐ Delete TITLE ☐ Change Addition TITLE MILLER, CHRISTOPHER G NAME NAME STREET ADDRESS STREET ADDRESS 5847 HARRISON ST CITY-ST-ZIP CITY-ST-ZIP **NEW PORT RICHEY FL 34653** No Delete TITLE ☐ Change Addition TITLE ASKINS, LAURA NAME NAME STREET ADDRESS STREET ADDRESS 1629 MONTEREY DR. CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 34615 ☐ Delete TITLE Change ☐ Addition TITLE NAME MILLER, CHRISTOPHER G NAME STREET ADDRESS STREET ADDRESS 5847 HARRISON ST CITY-ST-ZIP CITY-ST-ZIE **NEW PORT RICHEY FL 34653** TITLE ☐ Delete TITLE Change ☐ Addition NAME KEY, R. MICHAEL NAME STREET ADDRESS STREET ADDRESS 2750 PEACHTREE CIR

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.

CITY-ST-ZIP

SIGNATURE:

CLEARWATER FL

CITY - ST-7IP

JAN G. HALISKY GNATURE AND TYPED OR PRINTED AME OF SIGNING OFFICER OR DIRECTOR

Febr. 23, 2001