

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768083

FILED  
Feb 16, 2011  
Secretary of State

**Entity Name:** THE PREGNANCY & FAMILY LIFE CENTER OF CITRUS COUNTY, INC.

**Current Principal Place of Business:**

PREGNANCY & FAMILY LIFE CENTER  
317 W. TOMPKINS ST  
INVERNESS, FL 34450 US

**New Principal Place of Business:**

**Current Mailing Address:**

317 W TOMPKINS STREET  
INVERNESS, FL 34450 US

**New Mailing Address:**

PREGNANCY & FAMILY LIFE CENTER  
317 W. TOMPKINS ST  
INVERNESS, FL 34450 US

**FEI Number:** 59-2316370

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SLAYMAKER, THOMAS E., ESQ.  
2218 W. HWY 44  
INVERNESS, FL 34453 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: D  
Name: BURRELL, PETER  
Address: 600 E HOLLY STREET  
City-St-Zip: INVERNESS, FL 34452

Title: S  
Name: CAMPBELL, CYNTHIA  
Address: 190 N MESQUITE PT  
City-St-Zip: LECANTO, FL 34461

Title: T  
Name: GROSSMAN, MAUREEN  
Address: 1599 N. ENDICOTT PT  
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: V  
Name: KNOWLTON, JUDY  
Address: 302 TULIP LANE  
City-St-Zip: INVERNESS, FL 34452

Title: P  
Name: SLOUGH, SUSAN  
Address: 952 CHERRY POP DR  
City-St-Zip: INVERNESS, FL 34453

Title: D  
Name: CHISHOLM, MARILYN  
Address: 1601 S E 8TH AVENUE, LOT #320  
City-St-Zip: CRYSTAL RIVER, FL 34429

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: SUSAN SLOUGH

P

02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date