

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03843

FILED  
Apr 19, 2011  
Secretary of State

**Entity Name:** PREGNANCY RESOURCES, INC.

**Current Principal Place of Business:**

165 N.BABCOCK ST  
MELBOURNE, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

165 N. BABCOCK ST  
MELBOURNE, FL 32935

**New Mailing Address:**

**FEI Number:** 59-2542341

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MINOT, MICHAEL ESQ  
319 RIVERIDGE BLVD STE 218  
COCOA, FL 32922 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: SD  
Name: MORRIS, VIOLA  
Address: 273 SANDY RUN  
City-St-Zip: MELBOURNE, FL 32940

Title: TD  
Name: WELCH, JOHN  
Address: 2571 OKLAHOMA ST  
City-St-Zip: MELBOURNE, FL 32904

Title: VD  
Name: SHULL, STEVEN  
Address: 2720 WRIGHT AVE  
City-St-Zip: MELBOURNE, FL 32935

Title: PD  
Name: EVANS, LINDA  
Address: 3175 KNIGHT OAK CT  
City-St-Zip: MELBOURNE, FL 32934

Title: D  
Name: FULLER, MICHELE  
Address: 8426 MIZELL DRIVE  
City-St-Zip: MELBOURNE, FL 32940

Title: D  
Name: GRAFF, LYNETTE DR  
Address: 5 ROSSETTER CIRCLE  
City-St-Zip: INDIALANTIC, FL 32903

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: LINDA EVANS

PD

04/19/2011

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

\_\_\_\_\_  
Date