

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004109

FILED  
May 26, 2009  
Secretary of State

Entity Name: PREGNANCY CENTER OF OKEECHOBEE, INC.

## Current Principal Place of Business:

1501 S PARROTT AVENUE  
SUITE D  
OKEECHOBEE, FL 34794

## Current Mailing Address:

1501 S PARROTT AVENUE  
SUITE D  
OKEECHOBEE, FL 34794

## New Principal Place of Business:

1505 S PARROTT AVENUE  
SUITE D  
OKEECHOBEE, FL 34794

## New Mailing Address:

1505 S PARROTT AVENUE  
SUITE D  
OKEECHOBEE, FL 34794

FEI Number: 33-1164762      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

GARNER, LAURINDA M  
1208 SW 3RD AVE  
OKEECHOBEE, FL 34974      US

## Name and Address of New Registered Agent:

LUMPKIN, LISA R  
1505 S PARROTT AVENUE  
OKEECHOBEE, FL 34974      US

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: LISA R LUMPKIN

05/26/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD      ( ) Delete  
Name: BURK, STEPHEN E  
Address: 2721 SE 24TH BLVD  
City-St-Zip: OKEECHOBEE, FL 349746468

Title: VD      ( ) Delete  
Name: LUTJEN, LARRY M  
Address: 1551 NW 102ND ST  
City-St-Zip: OKEECHOBEE, FL 34972

Title: TD      ( ) Delete  
Name: PILGRIM, SUSAN  
Address: 906 NE 28TH TER.  
City-St-Zip: OKEECHOBEE, FL 34972

Title: D      ( ) Delete  
Name: GARNER, LAURINDA  
Address: 1208 SW 3RD AVE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: D      ( ) Delete  
Name: KELCHNER, DENISE  
Address: 2062 SW 18TH LN  
City-St-Zip: OKEECHOBEE, FL 349725615

Title: SD      ( ) Delete  
Name: LUTJEN, BARBARA  
Address: 1551 NW 102ND ST  
City-St-Zip: OKEECHOBEE, FL 34972

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D      (X) Change ( ) Addition  
Name: JOLICUER, NANCY  
Address: 2044 SW 19TH LANE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: TD      (X) Change ( ) Addition  
Name: HELTON, DONNA L  
Address: 393 SW 77TH TERR  
City-St-Zip: OKEECHOBEE, FL 34974

Title: D      (X) Change ( ) Addition  
Name: JEFFERS, CATHERINE  
Address: 505 SW 9TH ST  
City-St-Zip: OKEECHOBEE, FL 34974

Title: D      (X) Change ( ) Addition  
Name: WATFORD, CHERI  
Address: 701 NE 5TH ST  
City-St-Zip: OKEECHOBEE, FL 34972

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DONNA L. HELTON

TREA

05/26/2009

Electronic Signature of Signing Officer or Director

Date