2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07972

FILED Apr 21, 2009 Secretary of State

Entity Name: PINELLAS CRISIS PREGNANCY CENTER, INC.

Current Principal Place of Business: New Principal Place of Business: 1910 EAST BAY DRIVE LARGO, FL 33771 **Current Mailing Address: New Mailing Address:** 1910 EAST BAY DRIVE LARGO, FL 33771 FEI Number: 59-2588366 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PITCHON, SOL 467 BRIDLE PATH WAY TARPON SPRINGS, FL 34688 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete PITCHON, SOL Name: Name: 467 BRIDLE PATH WAY Address: Address: City-St-Zip: TARPON SPRINGS, FL 34688 City-St-Zip: Title: () Delete Title: (X) Change () Addition STEUER, MICHAEL Name: STEUER, MICHAEL Name: Address: 2613 BELLHURST DR. Address: 2613 BELLHURST DR. City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: DUNEDIN, FL 34698 Title: () Delete Title: DS (X) Change () Addition WIGGINTON, RAQUEL BACON, BRITTNY Name: Name: 4014 PORTSMOUTH ROAD Address: Address: 2959 1ST AVENUE NORTH City-St-Zip: LARGO, FL 33771 City-St-Zip: ST PETERSBURG, FL 33713 () Delete Title: DV Title: DC (X) Change () Addition Name: PILKINGTON, DAVID Name: PILKINGTON, DAVID 7295 SAVOY COURT Address: Address: 7295 SAVOY COURT City-St-Zip: SEMINOLE, FL 33776 City-St-Zip: SEMINOLE, FL 33776 Title: () Delete Title: () Change () Addition CHAPMAN, TOM Name: Name: 7675 HUNTER LANE Address: Address: City-St-Zip: PINELLAS PARK, FL 33782 City-St-Zip: Title: () Delete Title: (X) Change () Addition KOVAC, GREGORY ARRINGTON, KATHY Name: Name: Address: 2931 ELYSIUM WAY Address: 5400 50TH AVENUE NORTH CLEARWATER, FL 33759 City-St-Zip: ST PETERSBURG, FL 33709 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: SOL PITCHON PRES 04/21/2009