

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 09, 2007 8:00 am**  
**Secretary of State**

04-09-2007 90039 039 \*\*\*\*61.25

**DOCUMENT # N08149**

1. Entity Name

PREGNANCY CRISIS CARELINE, INC.



Principal Place of Business

Mailing Address

1685 TAMIAMI TR  
SUITE 4  
PORT CHARLOTTE FL 33949

PO BOX 495146  
PORT CHARLOTTE FL 33949-5146  
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip 33948

Country

Zip

Country

4. FEI Number

59-2508174

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/06)



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DZURAK, JOHN S  
1685 TAMIAMI TR  
PORT CHARLOTTE FL 33949

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite 4

City

FL

Zip Code  
33948

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete  
NAME BECKER OLIVIA  
STREET ADDRESS 2347 LAKESHORE CIRCLE  
CITY ST- ZIP PORT CHARLOTTE FL 33952

TITLE M/D ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY ST- ZIP

TITLE D ☐ Delete  
NAME DIMEGLIO, MICHAEL  
STREET ADDRESS 715 QUESADA BLVD  
CITY ST- ZIP PORT CHARLOTTE FL

☒ Change ☐ Addition  
NAME  
STREET ADDRESS 22501 Quasar Blvd.  
CITY ST- ZIP Port Charlotte, FL 33952

TITLE D ☐ Delete  
NAME DZURAK, JOHN S  
STREET ADDRESS 137 E. MARION AVE  
CITY ST- ZIP PUNTA GORDA FL 33950

☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY ST- ZIP

TITLE P ☐ Delete  
NAME PIZARRO, LINDA  
STREET ADDRESS 1247 ODYSSEY CT.  
CITY ST- ZIP PUNTA GORDA FL 33983

TITLE D ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY ST- ZIP

TITLE VP ☐ Delete  
NAME GAMBER, BETSY  
STREET ADDRESS 4295 FLINT DR  
CITY ST- ZIP NORTH PORT FL 34286

TITLE T/D ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY ST- ZIP

TITLE P/D ☐ Change ☒ Addition  
NAME Richard Schmith  
STREET ADDRESS 281 Ginger St.  
CITY ST- ZIP Port Charlotte, FL 33954

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

SIGNATURE: *Olivia S. Becker* Olivia Becker

3/22/07 941-625-5576

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

# ATTACHMENT

60033186

## CONTINUATION SHEET

To: Division of Corporations, Annual Report Section  
From: Pregnancy Crisis Careline, Inc.  
Date: March 22, 2007

ATTACHMENT TO DOCUMENT #NO8149

Block 11 - Additions to Officers and Directors in 10

Title: V/D  
Name: Sharon Ponte  
Street Address: 4418 Alamosos Terr.  
City - St - Zip: North Port, FL 34288

Title: S/D  
Name: Nancy McClary  
Street Address: 2621 Rio Tiber Dr.  
City - St - Zip: Punta Gorda, FL 33950

Title: D  
Name: Patricia Jobst  
Street Address: 22386 Madelyn Ave.  
City - St - Zip: Port Charlotte, FL 33952

Title: D  
Name: Anne Sawney  
Street Address: 21233 Knollwood Ave.  
City - St - Zip: Port Charlotte, FL 33952

Title: D  
Name: Winnie Skreckoski  
Street Address: 2997 Atwater Dr.  
City - St - Zip: North Port, FL 34288

Title: D  
Name: Dorothy Tagtow  
Street Address: 4491 Lubec Ave.  
City - St - Zip: North Port, FL 34287

Title: D  
Name: Chrisanne Harrington  
Street Address: 2533 Rio Tiber Dr.  
City - St - Zip: Punta Gorda, FL 33950