2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16940

FILED Feb 17, 2011 Secretary of State

Entity Name: WEST PASCO PREGNANCY CENTER, INC.

Current Principal Place of Business: New Principal Place of Business:

5330 GEORGE ST

NEW PORT RICHEY, FL 34652

Current Mailing Address: New Mailing Address:

5330 GEORGE ST

NEW PORT RICHEY, FL 34652

FEI Number: 59-2728990 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MERMELSTEIN, PATRICIA SULLIVAN, JOESEPH
14343 TEASDALE AVE 8269 STEWARD CT

HUDSON, FL 34667 US SPRING HILL, FL 34608 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: JOSEPH SULLIVAN 02/17/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D

 Name:
 GILL, CLIFFORD S

 Address:
 9264 WATER HAZARD DR

 City-St-Zip:
 HUDSON, FL 34667

Title: DP

Name: SULLIVAN, JOESEPH
Address: 8269 STEWARD CT
City-St-Zip: SPRING HILL, FL 34608

Title:

Name: REESE, CHARLIE
Address: 19907 READING RD.
City-St-Zip: LUTZ, FL 33558

Title: DAT

Name: YURICK, PATTI Address: 3424 BIGELOW DR City-St-Zip: HOLIDAY, FL 34691

Title: DT

Name: TIMMINS, JOHN M
Address: 186 ARBOR KNOLL LOOP
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: DS

Name: CAREY, WILLIAM

Address: 12816 IRONWOOD CIRCLE City-St-Zip: BAYONET POINT, FL 34667

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: JOSEPH SULLIVAN PRES 02/17/2011