

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47015

FILED
Feb 15, 2012
Secretary of State

Entity Name: PREGNANCY CARE CENTER OF PLANT CITY, INC.

Current Principal Place of Business:

304 NORTH COLLINS STREET
PLANT CITY, FL 33563

New Principal Place of Business:

Current Mailing Address:

PO BOX 2552
PLANT CITY, FL 33564

New Mailing Address:

FEI Number: 59-3139161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLEGO, MARJORIE A
304 N. COLLINS STREET
PLANT CITY, FL 33563 US

Name and Address of New Registered Agent:

DAVIS, DARLENE
304 N. COLLINS STREET
PLANT CITY, FL 33563 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: DARLENE DAVIS

02/15/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: HOWELL, JEFFREY
Address: 3001 PEMBERTON TRACE
City-St-Zip: PLANT CITY, FL 33563

Title: VP
Name: ATHEY, SKIP
Address: 4112 LONE HAVEN LANE
City-St-Zip: PLANT CITY, FL 33567

Title: SEC
Name: DEMAROIS, DENNIS
Address: 1308 E. CALHOUN ST
City-St-Zip: PLANT CITY, FL 33563

Title: TREA
Name: BALLARD, LAUREN
Address: 1415 PLANTATION CIRCLE, #805
City-St-Zip: PLANT CITY, FL 33566

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: LAUREN BALLARD

TREA

02/15/2012

Electronic Signature of Signing Officer or Director

Date