

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2005 8:00 am
Secretary of State

01-25-2005 90047 008 ****61.25

DOCUMENT # N47575

1. Entity Name
CENTRAL FLORIDA PREGNANCY CENTER, INC.



Principal Place of Business
**2922 HOWLAND BLVD
UNIT 1
DELTONA, FL 32725**

Mailing Address
**P.O. BOX 5343
DELTONA, FL 32728-5243**

00000034



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01182005

Chg-NP

CR2E037 (10/03)

4. FEI Number
59-3111579

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ERRICO, JESSICA C.
539 BALDWIN COURT
DELTONA, FL 32725**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

**Filing Fee is \$61.25
Due by May 1, 2005**

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

TITLE PD ☐ Delete
NAME ERRICO, JESSICA C
STREET ADDRESS 539 BALDWIN COURT
CITY-ST-ZIP DELTONA, FL 32725

TITLE DCT ☒ Delete
NAME MYERS, ROBERT
STREET ADDRESS 150 CATELINA DR
CITY-ST-ZIP DEBARY, FL 32713

TITLE DV ☐ Delete
NAME WEIGAND, FREDERICK
STREET ADDRESS 2670 DOYLE RD
CITY-ST-ZIP DELTONA, FL 32738

TITLE DT ☐ Delete
NAME MARCHANT, GISELE
STREET ADDRESS 1709 TWIN OAK ST
CITY-ST-ZIP DELTONA, FL 32738

TITLE DS ☒ Delete
NAME EDWARDS, CHERISE
STREET ADDRESS 68 LANTANA CT
CITY-ST-ZIP DEBARY, FL 32713

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DS ☐ Change ☒ Addition
NAME Pastor Chet Sparzak
STREET ADDRESS 1009 Norwood Dr.
CITY-ST-ZIP Deltona, FL 32725

TITLE D ☐ Change ☒ Addition
NAME Becky Stewart
STREET ADDRESS 119 E. Elm Dr.
CITY-ST-ZIP Orange City, FL 32763

TITLE DT ☐ Change ☒ Addition
NAME Greg LaFils
STREET ADDRESS 165 S. Oak Ave.
CITY-ST-ZIP Orange City, FL 32763

TITLE D ☒ Change ☐ Addition
NAME Gisele Marchant
STREET ADDRESS 1709 TWIN OAK ST.
CITY-ST-ZIP Deltona, FL 32738

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Jessica C. Errico *Jessica C. Errico*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/05
Date

(386) 532-4004
Daytime Phone #