

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001924

**FILED**  
**Mar 27, 2012**  
**Secretary of State**

**Entity Name:** BRANDON CRISIS PREGNANCY CENTER, INC.

**Current Principal Place of Business:**

122 NORTH MOON AVENUE  
BRANDON, FL 33510

**New Principal Place of Business:**

**Current Mailing Address:**

122 NORTH MOON AVENUE  
BRANDON, FL 33510

**New Mailing Address:**

**FEI Number:** 59-3229320

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROOKS, KAREN D  
3903 WHISPER GROVE COURT  
VALRICO, FL 33594 US

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

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:**

Title: C  
Name: BAXTER, JOHN  
Address: 2849 TIMBER KNOLL DRIVE  
City-St-Zip: VALRICO, FL 33594

Title: T  
Name: HERGES, HOGAN  
Address: 1126 LUMSDEN POINTE BLVD  
City-St-Zip: VALRICO, FL 33594

Title: P  
Name: GRAY, LAURA J  
Address: 3101 CREEKDALE CT  
City-St-Zip: BRANDON, FL 33511

Title: D  
Name: BROOKS, KAREN  
Address: 3903 WHISPER GROVE COURT  
City-St-Zip: VALRICO, FL 33594

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: KAREN BROOKS

D

03/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date