2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001915

FILED Apr 25, 2012 Secretary of State

Entity Name: PREGNANCY CARE CENTER, INC.

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

1119 DELAWARE AVE FORT PIERCE, FL 34950

Current Mailing Address: New Mailing Address:

1119 DELAWARE AVE FORT PIERCE, FL 34950

FEI Number: 65-0468255 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:

LOTIERZO, ANNE C
412 S.E. EDGEWOOD DR
STUART, FL 34996 US
LOTIERZO, ANNE C
1119 DELAWARE AVENUE
FORT PIERCE, FL 34950 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: ANNE C. LOTIERZO 04/25/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: V

Name: LOTIERZO, ANNE C
Address: 1119 DELAWARE AVENUE
City-St-Zip: FORT PIERCE, FL 34950

Title: S

Name: WEAVER, JACKIE
Address: 1119 DELAWARE AVENUE
City-St-Zip: FORT PIERCE, FL 34950

Title: P

Name: SHEKAILO, LORIE
Address: 1119 DELAWARE AVENUE
City-St-Zip: FORT PIERCE, FL 34950

Title:

Name: HARTLEY, KEITH

Address: 1119 DELAWARE AVENUE City-St-Zip: FORT PIERCE, FL 34950

Title:

Name: BOBKO, NOEL

Address: 1119 DELAWARE AVENUE City-St-Zip: FORT PIERCE, FL 34950

Title:

Name: BERRETH, DUANE
Address: 1119 DELAWARE AVENUE
City-St-Zip: FORT PIERCE, FL 34950 US

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: ANNE LOTIERZO V 04/25/2012