


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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

04-25-2005 90240 012 ****70.00

DOCUMENT # N23193					
1. Entity Name A NEW CREATION PREGNANCY CENTER, INC.					
Principal Place of Business 1231 E ORANGE ST LAKELAND, FL 33801 US			Mailing Address 1231 E ORANGE ST LAKELAND, FL 33801 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-2853796	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
KIRKLAND, JOHN E 1405 BARTOW ROAD LAKELAND, FL 33802			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 _____ (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. <input type="checkbox"/>		\$5.00 May Be Added to Fees
Make check payable to: Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MIDDLETON, WILLIAM G		NAME		
STREET ADDRESS	1605 STERLING DRIVE		STREET ADDRESS		
CITY-ST-ZIP	LAKELAND, FL 33813		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	S/T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOHNSON, HENRIETTA J		NAME	O Harrow, William	
STREET ADDRESS	824 SUGAR PLACE		STREET ADDRESS	4430 Vinson Road	
CITY-ST-ZIP	LAKELAND, FL 33801		CITY-ST-ZIP	Lakeland, FL 33809	
TITLE	DST	<input type="checkbox"/> Delete	TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ORTIZ, JOSE		NAME	Ortiz, Jose	
STREET ADDRESS	1611 STEPHANIE LANE		STREET ADDRESS	Same	
CITY-ST-ZIP	LAKELAND, FL 33813		CITY-ST-ZIP		
TITLE	DP	<input type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOOTH, JAMES SR		NAME	Booth, James Jr.	
STREET ADDRESS	407 WINDSOR STREET		STREET ADDRESS	6760 Lake Clark Dr.	
CITY-ST-ZIP	LAKELAND, FL 33803		CITY-ST-ZIP	Lakeland, FL 33813	
TITLE	MD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, DIANE E		NAME	Same	
STREET ADDRESS	1135 COLONY ARMS DRIVE		STREET ADDRESS		
CITY-ST-ZIP	LAKELAND, FL 33813		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	V/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EDWARDS, JIMMY R		NAME	Edwards, Jimmy R.	
STREET ADDRESS	4010 SUGAR CREEK LANE		STREET ADDRESS	6770 Lake Clark Dr.	
CITY-ST-ZIP	LAKELAND, FL 33811		CITY-ST-ZIP	Lakeland, FL 33813	
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: <u>Diane E. Smith / Diane E. Smith, Exec. Dir.</u> 4-21-05 (863) 683-2341					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

Con 4.

ATTACHMENT # N23193 / 20044139

10. Con't. Officers + Directors		11. Con't. Additions/Changes	
Title	D	<input checked="" type="checkbox"/> Delete	
Name	Garnett, Bernard E.		
Street Address	311 W. Maxwell Street		
City/St.	Lakeland, FL 33803		

Diane E. Smith / Diane E. Smith, Exec. Dir. 4-21-05 pl (863) 683-2341
 A New Creation Pregnancy Center
 1231 E. Orange St.
 Lakeland, FL 33801