

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000000298

**Entity Name:** SECULAR PRO-LIFE, INC.

**Current Principal Place of Business:**

3745 27 AVE SW  
NAPLES, FL 34117

**Current Mailing Address:**

3745 27 AVE SW  
NAPLES, FL 34117

**FEI Number:** 27-2095596

**Certificate of Status Desired:** No

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

HAZZARD, KELSEY  
3745 27 AVE SW  
NAPLES, FL 34117 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name HAZZARD, KELSEY L  
Address 4355 BUTTERFLY ORCHID LANE  
City-State-Zip: NAPLES FL 34119

Title VP  
Name SNYDER, MONICA  
Address 1628 BELL ST #4  
City-State-Zip: SCARAMENTO CA 95825

Title VP  
Name BUKOVINAC, TERRISA  
Address 821 GEARY ST #4  
City-State-Zip: SAN FRANCISCO CA 94109

*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:** KELSEY HAZZARD

**PRESIDENT**

**02/05/2021**

Electronic Signature of Signing Officer/Director Detail

Date