2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003851

FILED May 08, 2007 Secretary of State

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Entity Na	me: ICPI OF CENTRAL FLORIDA, INC.			
Current P	rincipal Place of Business:	New Principal Place	e of Business:	
	LE AVE #111 SPRINGS,, FL 32708			
Current M	lailing Address:	New Mailing Addres	ss:	
	LE AVE #111 SPRINGS, FL 32708			
	: 20-2680360 FEI Number Applied For () ce with s. 607.193(2)(b), F.S., the corporation did	FEI Number Not Applicable () not receive the prior notice.	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address	of New Registered Agent:	
655 W. MC SUITE 212 WINTER F	PARK, FL 32789 US	a number of changing its registers	od office ar registered agent ar beth	
	e named entity submits this statement for the e of Florida.	e purpose of changing its register	ed office or registered agent, or both,	
SIGNATU	RE:			
	Electronic Signature of Registered A	gent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () Delete SEVI, ROBERTO J 1270 BELLE AVE #111 WINTER SPRINGS, FL 32708	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	DVP () Delete OSMUN, WILLIAM 1270 BELLE AVE #111 WINTER SPRINGS, FL 32708	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	DST () Delete BARCHERS, TRACY L 1270 BELLE AVE #111 WINTER SPRINGS, FL 32708	Title: Name: Address: City-St-Zip:	() Change() Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

City-St-Zip:

SIGNATURE: TRACY BARCHERS DST 05/08/2007