2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P00000059610

Entity Name: ACCOUNTING & FINANCIAL SOLUTIONS OF CENTRAL FLORIDA INC.

Current Principal Place of Business:

101 NORTH COUNTRY CLUB ROAD
STE 216
LAKE MARY, FL 32746

New Principal Place of Business:

890 NORTHERN WAY
STE D2
WINTER SPRINGS, FL 32708

Current Mailing Address:

P.O. BOX 953815
LAKE MARY, FL 32795

New Mailing Address:

890 NORTHERN WAY
STE D2
WINTER SPRINGS, FL 32708

FEI Number: 59-3650864 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SQUILLANTE, RHONDA L
101 NORTH COUNTRY CLUB ROAD
STE 216
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

SQUILLANTE, RHONDA L
890 NORTHERN WAY
STE D2
WINTER SPRINGS, FL 32708 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: 04/30/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete
Name: SQUILLANTE, RHONDA L
Address: 101 NORTH COUNTRY CLUB ROAD #216
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition
Name: SQUILLANTE, RHONDA L
Address: 890 NORTHERN WAY
City-St-Zip: WINTER SPRINGS, FL 32708

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RHONDA L SQUILLANTE DPS 04/30/2009
Electronic Signature of Signing Officer or Director — Date