

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000153133

FILED  
Jan 04, 2012  
Secretary of State

**Entity Name:** PIONEER INVESTMENT CENTER OF C.F. INC.

**Current Principal Place of Business:**

427 E. TARPON AVE.  
SUITE # 600  
TARPON SPRINGS, FL 34689

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1363  
PORT RICHEY, FL 34673

**New Mailing Address:**

FEI Number: 59-2930306

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHMIDT, NORA  
1225 AUDOBAN DRIVE  
SUITE 204  
ORLANDO, FL 32804 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: SCHMIDT, NORA  
Address: 1225 AUDOBAN STREET  
City-St-Zip: ORLANDO, FL 32804

Title: D  
Name: GRANGER, GLORIA  
Address: 5600 W. COLONIAL DR.  
City-St-Zip: ORLANDO, FL 32808

Title: D  
Name: SANDRA, WALKER  
Address: 5600 W. COLONIAL DR.  
City-St-Zip: ORLANDO, FL 32808

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

SIGNATURE: NORA SCHMIDT

PRES

01/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date