

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000078158

FILED  
Jan 12, 2011  
Secretary of State

**Entity Name:** CMS INVESTMENTS OF HOLIDAY FLORIDA, INC.

**Current Principal Place of Business:**

3131 BLUFF BLVD.  
HOLIDAY, FL 34691

**New Principal Place of Business:**

**Current Mailing Address:**

3131 BLUFF BLVD.  
HOLIDAY, FL 34691

**New Mailing Address:**

**FEI Number:** 20-3306098

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GREAR, DOUGLAS E  
3131 BLUFF BLVD.  
HOLIDAY, FL 34691 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: PRES  
Name: GREAR, BECKY J  
Address: 3131 BLUFF BLVD.  
City-St-Zip: HOLIDAY, FL 34691

Title: VP  
Name: GREAR, DOUGLAS E  
Address: 3131 BLUFF BLVD.  
City-St-Zip: HOLIDAY, FL 34691

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: DOUGLAS E. GREAR

VP

01/12/2011

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

\_\_\_\_\_ Date