

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000025593

FILED  
Jan 19, 2011  
Secretary of State

**Entity Name:** THE FORBES CO. OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

1020 MEGANLYNN CT  
SAINT CLOUD, FL 34772 US

**New Principal Place of Business:**

**Current Mailing Address:**

1020 MEGANLYNN CT  
SAINT CLOUD, FL 34772 US

**New Mailing Address:**

**FEI Number:** 59-3036513      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MARK, BRIAN  
104 CHURCH STREET  
KISSIMMEE, FL 34741 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:** DPT  
**Name:** FORBES, PAUL  
**Address:** 1020 MEAN LYNN CT  
**City-St-Zip:** ST CLOUD, FL 34772

**Title:** DSV  
**Name:** FORBES, BEVERLY  
**Address:** 1020 MEAN LYNN CT  
**City-St-Zip:** ST CLOUD, FL 34772

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: PAUL FORBES

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

PRES

01/19/2011

\_\_\_\_\_  
Date