

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000098062

**FILED**  
**Apr 09, 2012**  
**Secretary of State**

**Entity Name:** THE SCHUMACHER GROUP OF FLORIDA, INC.

**Current Principal Place of Business:**

200 CORPORATE BLVD.  
SUITE 201  
LAFAYETTE, LA 70508

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 82368  
LAFAYETTE, LA 705988236

**New Mailing Address:**

**FEI Number:** 59-3414339

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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: C  
Name: SCHUMACHER, WILLIAM C MD  
Address: 200 CORPORATE BLVD., SUITE 201  
City-St-Zip: LAFAYETTE, LA 70508

Title: ICFO  
Name: BOURQUE, MARIE E  
Address: 200 CORPORATE BLVD., SUITE 201  
City-St-Zip: LAFAYETTE, LA 70508

Title: CSV P  
Name: FALK, LISHA C  
Address: 200 CORPORATE BLVD., SUITE 201  
City-St-Zip: LAFAYETTE, LA 70508

Title: PD  
Name: PILGRIM, RANDAL L  
Address: 200 CORPORATE BLVD., SUITE 201  
City-St-Zip: LAFAYETTE, LA 70508

Title: COO  
Name: GUIDRY, JAMES JR  
Address: 200 CORPORATE BLVD., SUITE 201  
City-St-Zip: LAFAYETTE, LA 70508

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: LISHA C FALK

CSV P

04/09/2012

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

\_\_\_\_\_ Date