

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 721049

**FILED**  
**Apr 12, 2013**  
**Secretary of State**  
**CC0476360729**

**Entity Name:** CHRISTIAN SERVICE CENTER FOR CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

808 W. CENTRAL BLVD.  
ORLANDO, FL 32805-8807

**Current Mailing Address:**

808 W. CENTRAL BLVD.  
ORLANDO, FL 32805-8807

**FEI Number: 59-1353031**

**Certificate of Status Desired: No**

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

STUART, ROBERT  
1300 ARTHUR  
ORLANDO, FL 32804 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name GROOVER, NATE  
Address 4806 BERRYWOOD DR.  
City-State-Zip: ORLANDO FL 32812

Title ED  
Name STUART, ROBERT F  
Address 1300 ARTHUR ST  
City-State-Zip: ORLANDO FL 32804

Title T  
Name CARPENTER, WALTER  
Address 630 VASSAR  
City-State-Zip: ORLANDO FL 32804

Title S  
Name FLOOD, KAREN  
Address 5 N HILLSIDE AVE  
City-State-Zip: ORLANDO FL 32803

Title V  
Name CORINO, KEITH  
Address 315 GROVELAND ST  
City-State-Zip: ORLANDO FL 32804

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

**SIGNATURE: ROBERT STUART**

**EXECUTIVE DIRECTOR**

**04/12/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date