

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000111269

**Entity Name:** MORTGAGE PROFESSIONALS OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

602 W 27TH ST  
SANFORD, FL 32773

**Current Mailing Address:**

PO BOX 950369  
LAKE MARY, FL 32795

**FEI Number: 59-3683073**

**Certificate of Status Desired: No**

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

BURR, FERN C  
602 W 27TH ST  
SANFORD, FL 32773 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 PD  
Name BURR, FERN C  
Address 2030 PALM WAY  
City-State-Zip: SANFORD FL 32773

*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: FERN C BURR**

**PRESIDENT**

**02/01/2021**

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

\_\_\_\_\_  
Date