

2015 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

02/27/2015

Electronic Signature of Signing Officer/Director Detail

Date