

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000153133

**Entity Name:** PIONEER INVESTMENT CENTER OF C.F. INC.

**Current Principal Place of Business:**

427 E. TARPON AVE.  
SUITE # 600  
TARPON SPRINGS, FL 34689

**Current Mailing Address:**

P.O. BOX 1363  
PORT RICHEY, FL 34673

**FEI Number: 59-2930306**

**Certificate of Status Desired: No**

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

SCHMIDT, NORA  
1225 AUDOBAN DRIVE  
SUITE 204  
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 PSD  
Name SCHMIDT, NORA  
Address 1225 AUDOBAN STREET  
City-State-Zip: ORLANDO FL 32804

Title VP  
Name DELLE-CASE, GLORIA  
Address P.O. BOX 1363  
City-State-Zip: PORT RICHEY FL 34673

Title D  
Name SANDRA, WALKER  
Address 5600 W. COLONIAL DR.  
City-State-Zip: ORLANDO FL 32808

*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: DELLE-CASE GLORIA**

**VICE PRESIDENT**

**02/03/2014**

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

\_\_\_\_\_  
Date