

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 627533

**FILED**  
**Feb 16, 2012**  
**Secretary of State**

**Entity Name:** MANAGEMENT CORPORATION OF CENTRAL FLORIDA

**Current Principal Place of Business:**

2044 E. ORANGE AVENUE  
EUSTIS, FL 32726 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1840  
EUSTIS, FL 32727 US

**New Mailing Address:**

**FEI Number:** 59-1940199

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAMPIONE, LESLIE  
324 E FIFTH AVE.  
MOUNT DORA, FL 32757 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: PD  
Name: SHAMROCK, KEITH  
Address: 2100 LAKE EUSTIS DR  
City-St-Zip: TAVARES, FL

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: KEITH SHAMROCK

PRES

02/16/2012

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

\_\_\_\_\_  
Date