## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 704372** 

PRIMROSE CENTER INC.

FILED Mar 25, 2009 Secretary of State

Entity Name: PRIMROSE CENTER, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:	
2733 S FERNCREEK AVE ORLANDO, FL 32806					
Current Mailing Address:			New Maili	New Mailing Address:	
2733 S FERNCREEK AVE ORLANDO, FL 32806					
FEI Number:	59-0699143	FEI Number Applied For ( ) FEI N	Number Not Appl	icable ( ) Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Nam				Address of New Registered Agent:	
VAN BUREN, MARY M EXECDIR 2733 S FERNCREEK AVENUE ORLANDO, FL 32806 US			2733 S FEI	MOBLEY, JERRY J EXECDIR 2733 S FERNCREEK AVENUE ORLANDO, FL 32806 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: JERRY J. MOBLEY				03/25/2009	
Electronic Signature of Registered Agent Date					
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PCD ()[ NORTH, LESLIE 1738 WESTOVE WINDERMERE,		Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	VC () [ JERRY, MOBLE 1905 HONNDS L WINTER PARK, I	AKE DR	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition MCCORMAC, WILLIAM 4222 PECAN LN ORLANDO, FL 32812	
Title: Name: Address: City-St-Zip:	D () [ SCOTT-EVANS, I 1614 OVERLOOI ORLANDO, FL 3	< RD	Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	D () [ GILLETT, VICKI 524 WOODVIEW LONGWOOD, FL	DRIVE	Title: Name: Address: City-St-Zip:	S (X) Change ( ) Addition GILLETT, VICKI 524 WOODVIEW DRIVE LONGWOOD, FL 32719	
Title: Name: Address: City-St-Zip:	S () DUMM, PAUL 4262 VIXEN CT OVIEDO, FL 327	Delete 165	Title: Name: Address: City-St-Zip:	CTD (X) Change ( ) Addition DUMM, PAUL 4262 VIXEN CT OVIEDO, FL 32765	
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	D ( ) Change (X) Addition GALLOWAY, HELEN 618 ALBERTSON PL ORLANDO, FL 32806	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HELEN GALLOWAY D 03/25/2009