2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2010
Secretary of State

DOCUMENT# 707760

Entity Name: CENTRAL FLORIDA SOCIETY OF FINANCIAL SERVICE PROFESSIONALS, INC.

Current Principal Place of Business:

1011 ALBERTA ST
LONGWOOD, FL 32750 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 522194
LONGWOOD, FL 327522194 US

New Mailing Address:

FEI Number: 59-2530031 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ADAMS, EARL R
1011 ALBERTA ST
LONGWOOD, FL 32750 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: MD
Name: ADAMS, EARL R
Address: 1011 ALBERTA ST
City-St-Zip: LONGWOOD, FL 32750 US

Title: STD
Name: ROTHENBERGER, LARRY R
Address: 11 S. BUMBY AVENUE, SUITE 200
City-St-Zip: ORLANDO, FL 32803 US

Title: D
Name: ROSS, MARC
Address: 11 S. BUMBY AVE, SUITE 200
City-St-Zip: ORLANDO, FL 32803 US

Title: D
Name: YOUNG, KIRK B
Address: 400 W. MORSE BLVD. STE 220
City-St-Zip: WINTER PARK, FL 32789 US

Title: PPD
Name: FOREMAN, DOUGLAS
Address: 2211 LEE RD, STE 100
City-St-Zip: WINTER PARK, FL 32789 US

Title: VPD
Name: BAUMGARTEN, GARY T
Address: P.O. BOX 2726
City-St-Zip: WINTER PARK,, FL 32790 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EARL R. ADAMS MD 02/15/2010

Electronic Signature of Signing Officer or Director Date