

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747780

FILED  
Jan 10, 2011  
Secretary of State

**Entity Name:** MORTGAGE BANKERS ASSOCIATION OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

901 LAKE DESTINY DR  
MAITLAND, FL 32751 US

**New Principal Place of Business:**

**Current Mailing Address:**

901 LAKE DESTINY DR  
MAITLAND, FL 32751

**New Mailing Address:**

**FEI Number:** 59-1916229

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ADAMCZAK, A J  
2400 MAITLAND CENTER PARKWAY  
SUITE 117  
MAITLAND, FL 32751 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: PE  
Name: BRIAN, POLLING  
Address: 2400 MAITLAND CENTER PARKWAY SUITE 235  
City-St-Zip: MAITLAND, FL 32751

Title: P  
Name: STRICKLAND, KEVIN  
Address: 1100 TOWN PARK CENTER  
City-St-Zip: LAKE MARY, FL 34746

Title: VP  
Name: TANKERSLY, JOHN  
Address: 1025 GREENWOOD BLVD., #300  
City-St-Zip: LAKE MARY, FL 32746

Title: S  
Name: KUBEK, TERRI S  
Address: 189 S. ORANGE AVE., #970  
City-St-Zip: ORLANDO, FL 32801

Title: T  
Name: ADAMCZAK, A J  
Address: 2400 MAITLAND CENTER PARKWAY  
City-St-Zip: MAITLAND, FL 32751

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: A.J. ADAMCZAK

T

01/10/2011

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

\_\_\_\_\_  
Date