

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000000157

**FILED**  
**Mar 12, 2010**  
**Secretary of State**

**Entity Name:** APARTMENT RESEARCH CONSULTANTS, INC.

**Current Principal Place of Business:**

10180 SW 71 CT.  
OCALA, FL 34476

**New Principal Place of Business:**

**Current Mailing Address:**

10180 SW 71 CT.  
OCALA, FL 34476

**New Mailing Address:**

**FEI Number:** 58-1963893

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORRISSEY, EDWARD  
10180 SW 71 CT.  
OCALA, FL 34476 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** CP  
**Name:** MORRISSEY, EDWARD R  
**Address:** 10180 SW 71 CT.  
**City-St-Zip:** OCALA, FL 34476

**Title:** DS  
**Name:** MORRISSEY, CAROL A  
**Address:** 10180 SW 71 CT.  
**City-St-Zip:** OCALA, FL 34476

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:** EDWARD R. MORRISSEY

PRES

03/12/2010

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

\_\_\_\_\_  
Date