

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000002008

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** THREESTARS OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

1743 PARK CENTER DRIVE  
SUITE 400  
ORLANDO, FL 32835

**New Principal Place of Business:**

1701 PARK CENTER DRIVE  
SUITE 100  
ORLANDO, FL 32835

**Current Mailing Address:**

1743 PARK CENTER DRIVE  
SUITE 400  
ORLANDO, FL 32835

**New Mailing Address:**

1701 PARK CENTER DRIVE  
SUITE 100  
ORLANDO, FL 32835

**FEI Number:** 26-4412192

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MYRA P. NICHOLSON, P.A.  
1743 PARK CENTER DRIVE  
SUITE 200  
ORLANDO, FL 32835 US

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

MYRA P. NICHOLSON, P.A.  
1701 PARK CENTER DRIVE  
SUITE 100  
ORLANDO, FL 32835 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:

04/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: DARR, BENJAMIN  
Address: 1701 PARK CENTER DRIVE, SUITE 100  
City-St-Zip: ORLANDO, FL 32835

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: BENJAMIN DARR

PSD

04/29/2011

Electronic Signature of Signing Officer or Director

Date