

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000004778

**FILED**  
**Apr 06, 2011**  
**Secretary of State**

**Entity Name:** CENTERCEDE BUSINESS PROTECTION SERVICES, INC.

**Current Principal Place of Business:**

212 S TRYON ST SUITE 1550  
CHARLOTTE, NC 28281

**New Principal Place of Business:**

212 S TRYON ST SUITE 1350  
CHARLOTTE, NC 28281

**Current Mailing Address:**

212 S TRYON ST SUITE 1550  
CHARLOTTE, NC 28281

**New Mailing Address:**

212 S TRYON ST SUITE 1350  
CHARLOTTE, NC 28281

**FEI Number:** 27-3455636

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: C  
Name: MOODY, FRANK  
Address: 2823 PROVIDENCE RD #316  
City-St-Zip: CHARLOTTE, NC 28211

Title: P  
Name: OVERCASH, JERRY  
Address: 3226 IDLEWOOD CIRCLE  
City-St-Zip: CHARLOTTE, NC 28209

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: JERRY OVERCASH

MR

04/06/2011

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

\_\_\_\_\_  
Date