2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F83616

t. Entity Name
GENCO OF CENTRAL FLORIDA, INC.



FILED Feb 09, 2004 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

1738 MARKHAM GLEN CRCLE LONGWOOD, FL 32779

1738 MARKHAM GLEN CIRCLE LONGWOOD, FL 32779



02032004

No Chg-P

CR2E034 (10/03)

4.	FE! Number
	59-2289097

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

401-422-1721

6.	Name and Address	of C	irrent Re	gistered	Agest	

DO NOT WRITE IN THIS SPACE

ALPER, HARVEY M 112 W CIRTUS ST ALTAMONTE SPRGS, FL 32714

DO NOT WRITE

· LE · · · · · · · · · · · · · · · · · ·	TE OF TOO, TE OEFT			IN	I HIS SPACE
	named entity submits this statement for the priors of registered agent	urpose of changing its registere	ed office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or primed name of registered agent and title if	applicable. (NOTE Registered	d Agent signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	9. Election Campaign Finan Trust Fund Contribution.	icing	\$5.00 May 8e Added to Fees	
HOL. BITLE NAME STREET ADDRESS CITY-SI-ZP BITLE NAME	OFFICERS AND DIRECT PTS FRENCH, GENE 1738 MARKHAM GLEN CRCL. LONGWOOD, FL	TORS			1100000042897 U2/10/04-80043-006 150.00
STREET ADDRESS CITY-ST-ZIP FITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
HTLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-DP					
DILE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby of indicated of the core changed	certify that the information supplied with this fit on this report or supplemental report is true a poration or the receiver or trustee empowered , or on an attachment with an address, with all	ing does not qualify for the exer and accurate and that my signat to execute this report as require other like empowered.	mption state ture shall haved ted by Chap	d in Section 119.07(3) te the same legal effe ter 607, Florida Statut	(ii) Florida Statutes. I further certify that the information of as if made under oath, that I am an officer or director es; and that my name appears in Block 10 or Block 11 if