

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K83523

FILED  
Apr 21, 2012  
Secretary of State

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

**Current Principal Place of Business:**

690 ENTERPRISE RD.  
OSTEEN, FL 32764

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4014  
ENTERPRISE, FL 32725

**New Mailing Address:**

**FEI Number:** 59-2947098

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURNS, ROBERT W.  
1900 E. ROBINSON AVE.  
ORLANDO, FL 32803 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: PRES  
Name: BURNS, ROBERT W.  
Address: 690 ENTERPRISE RD.  
City-St-Zip: OSTEEN, FL 32764

Title: VP  
Name: BURNS, LAURA K.  
Address: 690 ENTERPRISE RD.  
City-St-Zip: OSTEEN, FL 32764

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: ROBERT W. BURNS

PRES

04/21/2012

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

\_\_\_\_\_ Date