

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003430

FILED
Jan 15, 2008
Secretary of State

Entity Name: THE PLACE OF COMFORT, INCORPORATED

Current Principal Place of Business:

947 LONGDALE AVE.
LONGWOOD, FL 32750 US

New Principal Place of Business:

Current Mailing Address:

947 LONGDALE AVE.
LONGWOOD, FL 32750 US

New Mailing Address:

FEI Number: 59-3712997

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAEGER, JOERG
217 EAST IVANHOE BLVD., NORTH
ORLANDO, FL 32804 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: PD () Delete
Name: SANDLAND, GEORGE
Address: 986WILDFLOWER WAY
City-St-Zip: LONGWOOD, FL 32750 US

Title: VD () Delete
Name: HENKHAUS, BARBARA
Address: 939 LONGDALE AVE
City-St-Zip: LONGWOOD, FL 32750 US

Title: S () Delete
Name: FRYBERGER, SCOTT
Address: P.O.BOX 616043
City-St-Zip: ORLANDO, FL 32861 US

Title: T () Delete
Name: MACGILLIVRAY, ROXANE
Address: 330 PINEWILD CT.
City-St-Zip: ORLANDO, FL 32828 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DAUGHERTY, CATHIE
Address: 408 APRICOT DRIVE
City-St-Zip: OCOEE, FL 32761 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CATHIE DAUGHERTY

PD

01/15/2008

Electronic Signature of Signing Officer or Director

Date