

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003430

FILED  
Jan 06, 2010  
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, KAREN J MRS  
524 ESTATES PLACE  
LONGWOOD, FL 32779 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: P  
Name: HALL, BRANDON  
Address: 125 WEKIVA SPRINGS RD  
City-St-Zip: LONGWOOD, FL 32779 US

Title: VP  
Name: HENKHAUS, BARBARA  
Address: 555 SHEPERD RD.  
City-St-Zip: LONGWOOD, FL 32750 US

Title: S/T  
Name: LAUDAT, KIM  
Address: 945 LONGDALE AVENUE  
City-St-Zip: LONGWOOD, FL 32750 US

Title: N/A  
Name: N/A, N/A  
Address: N/A  
City-St-Zip: N/A, NA N/A

Title: N/A  
Name: N/A, N/A  
Address: N/A  
City-St-Zip: N/A, NA N/A

Title: N/A  
Name: N/A, N/A  
Address: N/A  
City-St-Zip: N/A, NA N/A NA

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BARBARA HENKHAUS      VP      01/06/2010  
Electronic Signature of Signing Officer or Director      Date