

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004845

FILED
Mar 14, 2012
Secretary of State

Entity Name: VICTIM SERVICE CENTER OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1801 LEE ROAD
SUITE 165
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

1801 LEE ROAD
SUITE 165
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 75-2978885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COSTA, GINA
1801 LEE ROAD
SUITE 165
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

COSTA, REGINA
1801 LEE ROAD
SUITE 165
WINTER PARK, FL 32789 US

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: REGINA COSTA

03/14/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C
Name: SANCHEZ, RAFAEL JR
Address: 455 WEST AMELIA STREET
City-St-Zip: ORLANDO, FL 32801 US

Title: VC
Name: FINKBEINER, ROBERT C JR.
Address: 135 W. CENTRAL BLVD, SUITE 1000
City-St-Zip: ORLANDO, FL 32801 US

Title: T
Name: GILLILAND, DREW
Address: 2 COURTHOUSE SQUARE
City-St-Zip: KISSIMMEE, FL 34741

Title: S
Name: HATCH, SARAH
Address: 2 COURTHOUSE SQUARE, SUITE 3500
City-St-Zip: KISSIMMEE, FL 34741

Title: ED
Name: COSTA, REGINA
Address: 1801 LEE ROAD
City-St-Zip: ORLANDO, FL 32807

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: REGINA COSTA

ED

03/14/2012

Electronic Signature of Signing Officer or Director

Date