

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002957

FILED
Apr 28, 2011
Secretary of State

Entity Name: W.A.R.M. OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

304 WEST BRIDGERS AVE
AUBURNDALE, FL 33823 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 104
AUBURNDALE, FL 33823 US

New Mailing Address:

FEI Number: 01-0647709

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCOLLUM & RINALDO, P.A.
129 SOUTH COMMERCE AVENUE
SEBRING, FL 33870 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
Name: ANDERSON, CHARLES
Address: 223 OLD BRIDGE CIRCLE
City-St-Zip: DAVENPORT, FL 33897

Title: VD
Name: ANDERSON, JUDITH
Address: 223 OLD BRIDGE CIRCLE
City-St-Zip: DAVENPORT, FL 33897

Title: BD
Name: FRAZIER, NORMAN LANIAR
Address: 304 WEST BRIDGERS AVE
City-St-Zip: AUBURNDALE, FL 33823

Title: TD
Name: BROWN, LULA E
Address: 2393 4TH STREET NE
City-St-Zip: WINTER HAVEN, FL 33881

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: LULA W BROWN

TD

04/28/2011

Electronic Signature of Signing Officer or Director

Date