

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001514

FILED  
Apr 12, 2008  
Secretary of State

**Entity Name:** ATTACHMENT SERVICES OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

427 CENTERPOINTE CIR., STE. 1878  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

**Current Mailing Address:**

427 CENTERPOINTE CIR., STE. 1878  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

**FEI Number:** 33-1046219

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GUERARD, TERESA  
427 CENTERPOINTE CIR., STE. 1878  
ALTAMONTE SPRINGS, FL 32701 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: D ( ) Delete  
Name: GUERARD, TERESA  
Address: 1571 PINE COURT  
City-St-Zip: APOPKA, FL 32703

Title: D ( ) Delete  
Name: BAKER, YVONNE  
Address: 427 CENTERPOINTE CIRCLE, SUITE 1878  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D (X) Delete  
Name: GUERARD, BREANA  
Address: 1571 PINE COURT  
City-St-Zip: APOPKA, FL 32703

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: GUERARD, BREANA  
Address: 427 CENTERPOINTE CIRCLE, SUITE 1878  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: TERESA GUERARD

D

04/12/2008

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

\_\_\_\_\_  
Date