

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002425

FILED  
Feb 27, 2011  
Secretary of State

**Entity Name:** CENTRAL FLORIDA QUETTES, INC.

**Current Principal Place of Business:**

812 SWEETWATER CLUB BLVD  
LONGWOOD, FL 32791 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. 915115  
LONGWOOD, FL 32791

**New Mailing Address:**

**FEI Number:** 74-3141142

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALEXANDER, FLORENCE DR.  
812 SWEETWATER CLUB BLVD.  
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:** FOUN  
**Name:** ALEXANDER, FLORENCE DR.  
**Address:** P.O. BOX 915115  
**City-St-Zip:** LONGWOOD, FL 32791

**Title:** VP  
**Name:** HILL, MILDRED MS.  
**Address:** 104 OLYMPUS DRIVE  
**City-St-Zip:** OCOEE, FL 34761

**Title:** MEM  
**Name:** COLES, MARIAN MS.  
**Address:** P.O. BOX 1165  
**City-St-Zip:** APOPKA, FL 32704

**Title:** TR  
**Name:** CHARLESTON, NICOLLETTE  
**Address:** 4314 WYNDCLIFF CR  
**City-St-Zip:** ORLANDO, FL 32817

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:** DR. FLORENCE ALEXANDER

FOUN

02/27/2011

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

\_\_\_\_\_  
Date