

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003851

FILED  
Apr 16, 2008  
Secretary of State

Entity Name: ICPI OF CENTRAL FLORIDA, INC.

## Current Principal Place of Business:

1270 BELLE AVE #111  
WINTER SPRINGS,, FL 32708

## New Principal Place of Business:

1824 W. WASHINGTON STREET  
ORLANDO, FL 32805

## Current Mailing Address:

1270 BELLE AVE #111  
WINTER SPRINGS, FL 32708

## New Mailing Address:

PO BOX 555486  
ORLANDO, FL 32855 US

FEI Number: 20-2680360

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KAPLAN, JEFFREY L  
655 W. MORSE BLVD.  
SUITE 212  
WINTER PARK, FL 32789 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: DP ( ) Delete  
Name: OSMUN, WILLIAM  
Address: 7608 EMERALD DR.  
City-St-Zip: W. MELBOURNE, FL 32904

Title: DVP ( ) Delete  
Name: WILLIS, JACK  
Address: 922 NW 36 DR.  
City-St-Zip: GAINESVILLE, FL 32605

Title: DT ( ) Delete  
Name: BLANCO, LOU  
Address: 9070 OLD COBB ROAD  
City-St-Zip: BROOKSVILLE, FL 32601

Title: DS ( ) Delete  
Name: FERREIRA, LUCIENE  
Address: 1824 W. WASHINGTON ST.  
City-St-Zip: ORLANDO, FL 32805

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: LOU BLANCO

DT

04/16/2008

Electronic Signature of Signing Officer or Director

Date