

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Jun 14, 2012  
Secretary of State**

DOCUMENT# N07000011507

**Entity Name:** CENTRAL FLORIDA COMMUNITY PLANNING & DEVELOPMENT, INC.**Current Principal Place of Business:**2835 W BAY HAVEN BLVD.  
TAMPA, FL 33611**New Principal Place of Business:****Current Mailing Address:**P. O. BOX 130721  
TAMPA, FL 33681**New Mailing Address:****FEI Number:** 61-1551822**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**JOSEPHS-MARSHALL, CARROL S  
2835 W. BAY HAVEN BLVD  
TAMPA, FL 33611 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  
Name: JOSEPHS-MARSHALL, CARROL S  
Address: 2835 W. BAY HAVEN BLVD.  
City-St-Zip: TAMPA, FL 33611

Title: D  
Name: COCROFT, RENEE P SEC  
Address: 903 E. CURTIS STREET  
City-St-Zip: TAMPA, FL 33603

Title: D  
Name: SANDERS, ELIZABETH TRES.  
Address: 5419 BOLD VENTURE PLACE  
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: D  
Name: KAPPAS, DONALD E V-PRES  
Address: 3326 STEINBECK PLACE  
City-St-Zip: PLANT CITY, FL 33566

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: CARROL JOSEPHS-MARSHALL

PRES

06/14/2012

Electronic Signature of Signing Officer or Director

Date