2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2012
Secretary of State

DOCUMENT# N93000000667

Entity Name: ACA OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

2759 MARSH WREN CIRCLE
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2759 MARSH WREN CIRCLE
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 59-3195479 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: ED
Name: MEHTA, JASBIR P
Address: 2759 MARSH WREN CIRCLE
City-St-Zip: LONGWOOD, FL 32779

Title: T
Name: KHANORKAR, SHARMILA
Address: 157 VISTA OAK DRIVE
City-St-Zip: LONGWOOD, FL 32779

Title: D
Name: ARORA, KIRAN
Address: 6515 CATRMEL LANE
City-St-Zip: ORLANDO, FL 34786

Title: D
Name: DEIHPANDE, ANIL
Address: 8839 SOUTHERN BREEZE DR.
City-St-Zip: ORLANDO, FL 32684

Title: P
Name: JHAVERI, GAURAV
Address: 5720 BEAR STONE RUN
City-St-Zip: OVIEDO, FL 32765

Title: D
Name: KUTNER, STEVEN R
Address: 151 LOOKOUT PLACE SUITE 110
City-St-Zip: MAITLAND, FL 32751

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: JASBIR MEHTA ED 04/29/2012

Electronic Signature of Signing Officer or Director — Date