

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007676

FILED
Apr 29, 2010
Secretary of State

Entity Name: THE FINANCIAL PLANNING ASSOCIATION OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

250 S RONALD REAGAN BLVD
SUITE 100
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

PO BOX 520310
LONGWOOD, FL 32750

New Mailing Address:

PO BOX 520310
LONGWOOD, FL 32752

FEI Number: 59-3629672

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRESLEY, SYLVIA
250 S RONALD REAGAN BLVD STE 100
LONGWOOD, FL 32750 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: KOVACH, DENISE
Address: 1111 DOUGLAS AVENUE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D
Name: PRESLEY, SYLVIA
Address: 250 S RONALD REAGAN BLVD STE 100
City-St-Zip: LONGWOOD, FL 32750

Title: D
Name: PATTERSON, RICK
Address: P O BOX 2922
City-St-Zip: WINDERMERE, FL 34786

Title: D
Name: BERT, AARON
Address: 1111 DOUGLAS AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D
Name: ALMEIDA, RICHARD
Address: 631 S ORLANDO AVE STE 400
City-St-Zip: WINTER PARK, FL 32789

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: SYLVIA C PRESLEY

PRES

04/29/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date