

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000027198

FILED  
Apr 10, 2004  
Secretary of State

**Entity Name:** CENTURY PLANT OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

2912 HUNTINGTON LANE  
SUITE 130  
ROCKLEDGE, FL 32955

**New Principal Place of Business:**

5525 LAKE POINSETT ROAD  
COCOA, FL 32926

**Current Mailing Address:**

3319 MAGUIRE BLVD.  
SUITE 130  
ORLANDO, FL 32803

**New Mailing Address:**

FEI Number: 59-3627722      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GALLOWAY, WM. MICHAEL  
3319 MAGUIRE BLVD.  
SUITE 130  
ORLANDO, FL 32803

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

GALLOWAY, WM. MICHAEL  
128 AVERY LAKE DRIVE  
WINTER SPRINGS, FL 32708

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: WM. MICHAEL GALLOWAY

04/10/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: VT ( ) Delete  
Name: GALLOWAY, WM. MICHAEL  
Address: 3319 MAGUIRE BLVD., SUITE 130  
City-St-Zip: ORLANDO, FL 32803

Title: PS ( ) Delete  
Name: GALLOWAY, MATTHEW S  
Address: 2912 HUNTINGTON LANE  
City-St-Zip: ROCKLEDGE, FL 32955

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VT (X) Change ( ) Addition  
Name: GALLOWAY, WM. MICHAEL  
Address: 128 AVERY LAKE DRIVE  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: PS (X) Change ( ) Addition  
Name: GALLOWAY, MATTHEW S  
Address: 5525 LAKE POINSETT ROAD  
City-St-Zip: COCOA, FL 32926

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WM. MICHAEL GALLOWAY

VT

04/10/2004

Electronic Signature of Signing Officer or Director

Date