

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000027198

FILED  
Mar 16, 2007  
Secretary of State

Entity Name: CENTURY PLANT OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

5525 LAKE POINSETT ROAD  
COCOA, FL 32926

**New Principal Place of Business:**

**Current Mailing Address:**

2000 TOWN PLAZA COURT  
WINTER SPRINGS, FL 32708

**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  
128 AVERY LAKE DRIVE  
WINTER SPRINGS, FL 32708 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MATTHEW S. GALLOWAY

PVST

03/16/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date