

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000114635

**FILED**  
**Apr 05, 2012**  
**Secretary of State**

**Entity Name:** CENTRAL FLORIDA BALLOONS, INC.

**Current Principal Place of Business:**

1370 N. MACEY DR  
LONGWOOD, FL 32750

**New Principal Place of Business:**

283 CRANES ROOST BLVD.  
111  
ALTAMONTE SPRINGS, FL 32701 US

**Current Mailing Address:**

1370 N. MACEY DR  
LONGWOOD, FL 32750

**New Mailing Address:**

283 CRANES ROOST BLVD.  
111  
ALTAMONTE SPRINGS, FL 32701 US

**FEI Number:** 65-1060745

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAVENPORT, RICHARD B  
1370 N. MACEY DR  
LONGWOOD, FL 32750 US

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

DAVENPORT, RICHARD B  
283 CRANES ROOST BLVD.  
SUITE 111  
ALTAMONTE SPRINGS, FL 32701 US

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:** RICHARD DAVENPORT

04/05/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** DAVENPORT, RICHARD  
**Address:** 283 CRANES ROOST BLVD. SUITE 111  
**City-St-Zip:** ALTAMONTE SPRINGS, FL 32701 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** RICHARD DAVENPORT

PRES

04/05/2012

Electronic Signature of Signing Officer or Director

Date