

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000047729

FILED
Apr 28, 2006
Secretary of State

Entity Name: NEW DIMENSIONS OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

2867 STONEWALL PLACE, STE. #105
SANFORD, FL 32773

New Principal Place of Business:

2867 STONEWALL PLACE, STE. #105
SANFORD, FL 32773 US

Current Mailing Address:

2428 S MAPLE AVE
SANFORD, FL 32771

New Mailing Address:

2428 S MAPLE AVE
SANFORD, FL 32771 US

FEI Number: 59-3727477

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEVORE, ROSA
2428 S MAPLE AVE
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

DEVORE, ROSA L
2428 S MAPLE AVE
SANFORD, FL 32771 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: ROSA L DEVORE

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: WALTER, JAMES R
Address: 457 WOODFORD DRIVE
City-St-Zip: DEBARY, FL 32713

Title: VPS () Delete
Name: WALTER, PRISCILLA
Address: 457 WOODFORD DRIVE
City-St-Zip: DEBARY, FL 32713

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPS (X) Change () Addition
Name: WALTER, PRISCILLA
Address: 457 WOODFORD DRIVE
City-St-Zip: DEBARY, FL 32713

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: JAMES R WALTER

P/T

04/28/2006

Electronic Signature of Signing Officer or Director

Date