2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2012
Secretary of State

DOCUMENT# P01000055894

Entity Name: FACILITIES MANAGEMENT CONSULTING, INC.

Current Principal Place of Business:

334 BURCHETTE RD.
MANSON, NC 27553

New Principal Place of Business:

Current Mailing Address:

334 BURCHETTE ROAD
MANSON, NC 27553

New Mailing Address:

9015 LAUREL RIDGE DR.
MT. DORA, FL 32757

FEI Number: 59-3725957 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KITCHEN, ROSE P
3701 S. LAKE ORLANDO PKWY.
UNIT #5
ORLANDO, FL 32808 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: PD
Name: MEADOWS, BENJAMIN W
Address: 334 BURCHETTE RD.
City-St-Zip: MANSON, NC 27553

Title: VD
Name: LATHAM, CORBIE L
Address: 1404 CLAY ST.
City-St-Zip: WINTER PARK, FL 32789

Title: STD
Name: MEADOWS, BENJAMIN W II
Address: 114 ASHFORD PARKWAY
City-St-Zip: ATLANTA, GA 30338

Title: D
Name: KITCHEN, ROSE P
Address: 3701 S. LAKE ORLANDO PKWAY, UNIT #5
City-St-Zip: ORLANDO, FL 32808

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: BENJAMIN W. MEADOWS PRES 01/05/2012

Electronic Signature of Signing Officer or Director — Date