

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000061435

Entity Name: ELIZABETH B HILL LCSW, INC.

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

631 PALM SPRINGS DRIVE  
107  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

**Current Mailing Address:**

1009 SHERRYWOOD STREET  
FERN PARK, FL 32730 29

**New Mailing Address:**

FEI Number: 20-0991737

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TAX CARE, INC.  
417 CENTER POINT CIRCLE  
1737  
ALTAMONTE SPRINGS, FL 32701 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: D  
Name: HILL, ELIZABETH B  
Address: 1009 SHERRYWOOD STREET  
City-St-Zip: FERN PARK, FL 32730 29

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: ELIZABETH B HILL, LCSW, INC.

D

02/17/2011

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

\_\_\_\_\_  
Date