

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000162169

FILED  
Feb 06, 2012  
Secretary of State

**Entity Name:** THE CHRYSALIS CENTER, INC.

**Current Principal Place of Business:**

3800 W. BROWARD BLVD,  
STE. 100  
FORT LAUDERDALE, FL 33312

**New Principal Place of Business:**

**Current Mailing Address:**

3800 W. BROWARD BLVD,  
STE. 100  
FORT LAUDERDALE, FL 33312

**New Mailing Address:**

**FEI Number:** 20-1966531

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LACASA, EDUARDO R  
3800 W. BROWARD BLVD, STE 100  
FORT LAUDERDALE, FL 33312 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: P  
Name: MENENDEZ, MANUEL  
Address: 3800 W. BROWARD BLVD.,  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: V  
Name: ANGEL, JUNQUERA  
Address: 3800 W. BROWARD BLVD.,  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: COO  
Name: LACASA, EDUARDO  
Address: 3800 W. BROWARD BLVD.,  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D  
Name: LYNCH, LESLIE  
Address: 3800 W. BROWARD BLVD.,  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: CFO  
Name: DEMILLE, ANUSKA V  
Address: 3800 W BROWARD BLVD.,  
City-St-Zip: FORT LAUDERDALE, FL 33312

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: EDUARDO LACASA

COO

02/06/2012

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

\_\_\_\_\_  
Date