

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000079599

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** MAYBAR MANAGEMENT CORP

**Current Principal Place of Business:**

195 WEKIVA SPRINGS ROAD  
SUITE 200  
LONGWOOD, FL 32779

**New Principal Place of Business:**

195 WEKIVA SPRINGS ROAD  
SUITE 200  
LONGWOOD, FL 32779 US

**Current Mailing Address:**

P.O. BOX 917297  
LONGWOOD, FL 32791

**New Mailing Address:**

P.O. BOX 917297  
LONGWOOD, FL 32791 US

**FEI Number:** 20-2937752

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GROSS, ANDREW L  
195 WEKIVA SPRINGS ROAD  
SUITE 200  
LONGWOOD, FL 32779 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: GROSS, ANDREW L  
Address: 195 WEKIVA SPRINGS ROAD, SUITE 200  
City-St-Zip: LONGWOOD, FL 32779 US

Title: STD  
Name: GROSS, LAURA J  
Address: 195 WEKIVA SPRINGS ROAD, SUITE 200  
City-St-Zip: LONGWOOD, FL 32779 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: ANDREW L GROSS

PRES

05/01/2012

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

\_\_\_\_\_ Date