

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000122093

FILED  
Jul 13, 2007  
Secretary of State

Entity Name: TEAMWORKS OF CENTRAL FLORIDA, INC

**Current Principal Place of Business:**

52 RILEY ROAD # 340  
CELEBRATION, FL 32747

**New Principal Place of Business:**

**Current Mailing Address:**

52 RILEY ROAD # 340  
CELEBRATION, FL 32747

**New Mailing Address:**

FEI Number: 20-3426276

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORREA, AIDA  
1825 ANNA CATHERINE DRIVE  
ORLANDO, FL 32828 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CORREA, AIDA  
Address: 1825 ANNA CATHERINE DRIVE  
City-St-Zip: ORLANDO, FL 32828

Title: VP ( ) Delete  
Name: FIGUEROA, NELLY  
Address: 1122 CELEBRATION AVE  
City-St-Zip: CELEBRATION, FL 34747

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

I hereby certify that the information supplied with this filing does not qualify 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: NELLY FIGUEROA

VP

07/13/2007

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

\_\_\_\_\_  
Date