

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000076754

FILED
Apr 30, 2011
Secretary of State

Entity Name: SPEECH & LANGUAGE PATHOLOGY OF CENTRAL FLORIDA INC.

Current Principal Place of Business:

540 E. HORATIO
STE. 215
MAITLAND, FL 32751

New Principal Place of Business:

540 E. HORATIO
STE. 330
MAITLAND, FL 32751

Current Mailing Address:

P.O. BOX 291
WINTER PARK, FL 32790

New Mailing Address:

FEI Number: 20-4992038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESDEN, LAILA
540 E. HORATIO
STE. 215
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

ESDEN, LAILA
540 E. HORATIO
STE. 330
MAITLAND, FL 32751 US

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

04/30/2011

Date

OFFICERS AND DIRECTORS:

Title: P
Name: ESDEN, LAILA
Address: 540 E. HORATIO
City-St-Zip: MAITLAND, FL 32751

Title: VP
Name: ESDEN, LAILA
Address: 540 E. HORATIO
City-St-Zip: MAITLAND, FL 32751

Title: S
Name: ESDEN, LAILA
Address: 540 E. HORATIO
City-St-Zip: MAITLAND, FL 32751

Title: T
Name: ESDEN, LAILA
Address: 540 E. HORATIO
City-St-Zip: MAITLAND, FL 32751

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: LAILA ESDEN

P

04/30/2011

Electronic Signature of Signing Officer or Director

Date