

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000097026

Entity Name: CORES PLUS, INC.

**FILED**  
**Mar 22, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5560 TWIN CREEK  
PACE, FL 32571

**New Principal Place of Business:**

**Current Mailing Address:**

5560 TWIN CREEK  
PACE, FL 32571

**New Mailing Address:**

FEI Number: 20-5212571

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHNELLE, KATHLEEN S  
5560 TWIN CREEK  
PACE, FL 32571 US

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

SCHNELLE, KATHLEEN S VP  
5560 TWIN CREEK  
PACE, FL 32571 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: KATHLEEN SCHNELLE

03/22/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SCHNELLE, GEORGE D  
Address: 5560 TWIN CREEK  
City-St-Zip: PACE, FL 32571

Title: VP  
Name: SCHNELLE, KATHLEEN S  
Address: 5560 TWIN CREEK  
City-St-Zip: PACE, FL 32571 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: KATHLEEN SCHNELLE

V.P.

03/22/2012

Electronic Signature of Signing Officer or Director

Date