2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2010
Secretary of State

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Entity Name: CENTRAL FLORIDA RECOVERY SPECIALIST, INC

Current Principal Place of Business:

800 BARREL ROAD
FORT PIERCE, FL 34982

New Principal Place of Business:

3625 PLEASANT ACRES RD
FORT PIERCE, FL 34982

Current Mailing Address:

PO BOX 881133
PORT ST LUCIE, FL 34988 US

New Mailing Address:

FEI Number: 20-5926218 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMAS, JOSHUA L
800 BARREL AVE
FORT PIERCE, FL 34982 US

Name and Address of New Registered Agent:

THOMAS, JOSHUA L
3625 PLEASANT ACRES RD
FORT PIERCE, FL 34982 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: JOSHUA L THOMAS 04/30/2010
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P
Name: THOMAS, JOSHUA L
Address: 3625 PLEASANT ACRES RD
City-St-Zip: FORT PIERCE, FL 34982 US

Title: VP
Name: HUBBARD, JEFFREY A
Address: 3625 PLEASANT ACRES RD
City-St-Zip: FORT PIERCE, FL 34982 US

Title: TR
Name: HUBBARD, MEGAN J
Address: 3625 PLEASANT ACRES RD
City-St-Zip: FORT PIERCE, FL 34982 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: MEGAN J HUBBARD T 04/30/2010
Electronic Signature of Signing Officer or Director Date