

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000052076

FILED
Apr 27, 2012
Secretary of State

Entity Name: CENTRAL FLORIDA HEALTH AND SAFETY TRAINING CENTER, INC.

Current Principal Place of Business:

117 WOODSIDE DRIVE
LAKELAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5715
LAKELAND, FL 33807

New Mailing Address:

FEI Number: 20-8838182

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLCOMB, CYNTHIA A
117 WOODSIDE DRIVE
LAKELAND, FL 33813 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: PRES
Name: HOLCOMB, CYNTHIA A
Address: 117 WOODSIDE DRIVE
City-St-Zip: LAKELAND, FL 33813

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: CYNTHIA HOLCOMB

PRES

04/27/2012

Electronic Signature of Signing Officer or Director

Date