

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000001664

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Entity Name:** CENTRAL FLORIDA CERTIFIED CONTRACTING INC.

**Current Principal Place of Business:**

8504 N NEWPORT AVE.  
TAMPA, FL 33604

**New Principal Place of Business:**

15121 NIGHTHAWK DR.  
TAMPA, FL 33625

**Current Mailing Address:**

8504 N NEWPORT AVE.  
TAMPA, FL 33604

**New Mailing Address:**

15121 NIGHTHAWK DR.  
TAMPA, FL 33625

FEI Number: 36-4625301

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

COURTNEY, KEVIN M  
8504 N NEWPORT AVE  
TANPA, FL 33604 US

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

COURTNEY, KEVIN M  
15121 NIGHTHAWK DR.  
TANPA, FL 33625 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

04/25/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: COURTNEY, KEVIN M  
Address: 15121 NIGHTHAWK DR.  
City-St-Zip: TAMPA, FL 33625

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: KEVIN M. COURTNEY

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

P

04/25/2011

\_\_\_\_\_  
Date