

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000018090

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Entity Name:** PROFRAN CONSULTANTS, INC.

**Current Principal Place of Business:**

12868 GETTYSBURG CIRCLE  
ORLANDO, FL 32837

**New Principal Place of Business:**

13208 GLACIER NATIONAL DRIVE  
4402  
ORLANDO, FL 32837

**Current Mailing Address:**

12868 GETTYSBURG CIRCLE  
ORLANDO, FL 32837

**New Mailing Address:**

13208 GLACIER NATIONAL DRIVE  
4402  
ORLANDO, FL 32837

**FEI Number:** 26-4436750

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOLLOWELL, KEN M  
12868 GETTYSBURG CIRCLE  
ORLANDO, FL 32837 US

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

HOLLOWELL, KEN M  
13208 GLACIER NATIONAL DRIVE  
4402  
ORLANDO, FL 32837 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:** KEN M. HOLLOWELL

01/06/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** HOLLOWELL, KEN M  
**Address:** 13208 GLACIER NATIONAL DRIVE #4402  
**City-St-Zip:** ORLANDO, FL 32837

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:** KEN M. HOLLOWELL

P

01/06/2012

Electronic Signature of Signing Officer or Director

Date