

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000077654

**FILED**  
**Apr 22, 2011**  
**Secretary of State**

**Entity Name:** FIRESTAR OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

1009 MAITLAND CENTER COMMONS BOULEVARD  
SUITE 210  
MAITLAND, FL 32751

**New Principal Place of Business:**

320 W. SABAL PALM PLACE  
SUITE 300  
LONGWOOD, FL 32779

**Current Mailing Address:**

1009 MAITLAND CENTER COMMONS BOULEVARD  
SUITE 210  
MAITLAND, FL 32751

**New Mailing Address:**

320 W. SABAL PALM PLACE  
SUITE 300  
LONGWOOD, FL 32779

**FEI Number:** 27-0954979

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HARRISON, RODRAN  
1009 MAITLAND CENTER COMMONS BOULEVARD  
SUITE 210  
MAITLAND, FL 32751 US

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

HARRISON, RODRAN  
320 W. SABAL PALM PLACE  
SUITE 300  
LONGWOOD, FL 32779 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: RODRAN HARRISON

04/22/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: HARRISON, RODRAN  
Address: 320 W SABAL PALM PLACE, STE 300  
City-St-Zip: LONGWOOD, FL 32779

Title: DVP  
Name: HARRISON, DERRICK  
Address: 320 W. SABAL PALM PLACE, SUITE 300  
City-St-Zip: LONGWOOD, FL 32751

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: RODRAN HARRISON

DP

04/22/2011

Electronic Signature of Signing Officer or Director

Date