

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000015494

FILED
Feb 29, 2012
Secretary of State

Entity Name: HCP OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1848 WESTERN HILLS LANE
MASCOTTE, FL 34753 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 503
GROVELAND, FL 34736 US

New Mailing Address:

FEI Number: 27-1962351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETERS, HEIDI
1848 WESTERN HILLS LANE
MASCOTTE, FL 34753 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: P,D
Name: PETERS, HEIDI
Address: 1848 WESTERN HILLS LANE
City-St-Zip: MASCOTTE, FL 34753 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: HEIDI PETERS

P

02/29/2012

Electronic Signature of Signing Officer or Director

Date