

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000049830

FILED
Apr 22, 2011
Secretary of State

Entity Name: ACCURATE TAX & ACCOUNTING OF CENTRAL FLORIDA, INC

Current Principal Place of Business:

11791 SE US HWY 441
BELLEVIEW, FL 34420 US

New Principal Place of Business:

Current Mailing Address:

11791 SE US HWY 441
BELLEVIEW, FL 34420 US

New Mailing Address:

FEI Number: 27-2906423

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOX, WILLIAM L
11844 SE 169TH AVE RD
OCKLAWAHA, FL 32179 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
Name: CHEFFO, JOSEPH
Address: 11791 SE US HWY 441
City-St-Zip: BELLEVIEW, FL 34421 US

Title: VP
Name: FOX, WILLIAM L
Address: 11844 SE 169TH AVE RD
City-St-Zip: OCKLAWAHA, FL 32179 US

Title: SEC
Name: WOLFE, STEPHANIE
Address: 19 LAKE DIAMOND BLVD
City-St-Zip: OCALA, FL 34472 US

Title: DIR
Name: CASTELLI, LOUISE
Address: 19 LAKE DIAMOND BLVD
City-St-Zip: OCALA, FL 34472 US

Title: DIR
Name: WOLFE, STEPHANIE
Address: 19 LAKE DIAMOND BLVD
City-St-Zip: OCALA, FL 344725 US

Title: DIR
Name: FOX, WILLIAM L
Address: 11844 SE 169TH AVE RD
City-St-Zip: OCKLAWAHA, FL 32179 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: WILLIAM FOX

VP

04/22/2011

Electronic Signature of Signing Officer or Director

Date