2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000049830

Apr 20, 2012 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

11791 SE US HWY 441 11799 SE US HWY 441

BELLEVIEW, FL 34420 US BELLEVIEW, FL 34420 US

Current Mailing Address: New Mailing Address:

11791 SE US HWY 441 BELLEVIEW, FL 34420 US 11799 SE US HWY 441 BELLEVIEW, FL 34420 US

FEI Number: 27-2906423 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FOX, WILLIAM L 11844 SE 169TH AVE RD OCKLAWAHA, FL 32179 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 Date

OFFICERS AND DIRECTORS:

Title:

 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 L FOX VP 04/20/2012