

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000100700

FILED
Mar 06, 2012
Secretary of State

Entity Name: 2PLUS OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

C/O MARK S. SHIPMAN
2001 N. OCEAN BOULEVARD #501
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

1800 SILAS DEANE HIGHWAY
#305-N
ROCKY HILL, CT 06067

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: YORK, BYRON
Address: 314 HIGHLANDS BLUFF DRIVE, SUITE 110
City-St-Zip: CARY, NC 27511

Title: S, D
Name: SHIPMAN, MARK S
Address: 20 BATTERSON PARK ROAD
City-St-Zip: FARMINGTON, CT 06032

Title: D
Name: ADAMS, PATRICIA K
Address: 6620 CYPRESS WOODS DRIVE, SUITE 200
City-St-Zip: SPRING, TX 77379

Title: D
Name: CHERRY, REBECCA
Address: 6227 GOTHIC CT
City-St-Zip: CHARLOTTE, NC 28210

Title: D
Name: STOLTZ, RICHARD
Address: 64 PRATT STREET
City-St-Zip: HARTFORD, CT 06103

Title: D
Name: CROSS, SANFORD
Address: 220 JANSMITH LANE
City-St-Zip: RALEIGH, NC 27615

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: MARK S. SHIPMAN

S

03/06/2012

Electronic Signature of Signing Officer or Director

Date