

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000009453

**FILED**  
**Jan 24, 2011**  
**Secretary of State**

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

**Current Principal Place of Business:**

2472 N. CITRUS BLVD.  
LEESBURG, FL 34748

**New Principal Place of Business:**

**Current Mailing Address:**

2472 N. CITRUS BLVD.  
LEESBURG, FL 34748

**New Mailing Address:**

**FEI Number:** 59-3431763

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BONYNGE, JEAN  
2472 N. CITRUS BLVD.  
LEESBURG, FL 34748 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:** PD  
**Name:** BONYNGE, ROGER  
**Address:** 5515 GROVE MANOR  
**City-St-Zip:** LADY LAKE, FL 32159

**Title:** STD  
**Name:** BONYNGE, JEAN  
**Address:** 5515 GROVE MANOR  
**City-St-Zip:** LADY LAKE, FL 32159

**Title:** VP  
**Name:** BONYNGE, GREGORY  
**Address:** 5151 HUTCHINSON WAY  
**City-St-Zip:** LADY LAKE, FL 32159

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:** ROGER BONYNGE

PD

01/24/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date