

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000068282

**FILED**  
**Feb 04, 2011**  
**Secretary of State**

**Entity Name:** COMPREHENSIVE TRAINING CENTER, INC.

**Current Principal Place of Business:**

8930 ST RD 84  
#304  
DAVIE, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

214 LEDGE LANE  
CORNWALL, VT 05753

**New Mailing Address:**

**FEI Number:** 65-0782778

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSE, ESQ, ANDREW C  
1800 CORPORATE BLVD.  
SUITE 302  
BOCA RATON, FL 33431 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:** DP  
**Name:** ROSE, JACKIE  
**Address:** 214 LEDGE LN.  
**City-St-Zip:** CORNWALL, VT 05753 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:** JACKIE ROSE

DP

02/04/2011

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

\_\_\_\_\_  
Date