

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V14375

FILED  
Jan 09, 2012  
Secretary of State

Entity Name: MAYFLOWER CENTER, INC.

**Current Principal Place of Business:**

1101 NORTH LAKE DESTINY ROAD  
SUITE 475  
MAITLAND, FL 32751 US

**New Principal Place of Business:**

**Current Mailing Address:**

1101 NORTH LAKE DESTINY ROAD  
SUITE 475  
MAITLAND, FL 32751 US

**New Mailing Address:**

FEI Number: 59-3119218

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HIRESH, MITRI M  
1101 N LAKE DESTINY RD  
STE 475  
MAITLAND, FL 32751 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: HIRESH, MITRI M  
Address: STE 475, 1101 NORTH LAKE DESTINY RD  
City-St-Zip: MAITLAND, FL

Title: V  
Name: HIRESH, MICHELLE  
Address: 1101 N LK DESTINY RD, STE 475  
City-St-Zip: MAITLAND, FL 32751

Title: V  
Name: BLACK, RONALD W  
Address: 1101 N LAKE DESTINY RD., SUITE 475  
City-St-Zip: MAITLAND, FL 32751

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: RONALD W. BLACK

V

01/09/2012

Electronic Signature of Signing Officer or Director

Date