# 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.

VP

SIGNATURE: MAYLINDA DETWEILER

Electronic Signature of Signing Officer/Director Detail

# 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H06035

#### Entity Name: CENTRAL MERIDIAN CORPORATION

#### **Current Principal Place of Business:**

529 VERSAILLES DR STE 200 MAITLAND, FL 32751

#### **Current Mailing Address:**

529 VERSAILLES DR STE 200 MAITLAND, FL 32751 US

#### FEI Number: 59-2563417

### Name and Address of Current Registered Agent:

SINGLETON, RALPH 529 VERSAILLES DR STE 200 MAITLAND, FL 32751 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

#### Officer/Director Detail :

Title	PD	Title	S
Name	SINGLETON, RALPH	Name	SINGLETON, DORIS A.
Address	1602 SUMMERLAND	Address	1602 SUMMERLAND
City-State-Zip:	WINTER PARK FL 32789	City-State-Zip:	WINTER PARK FL 32789
Title	VP		
Name	DETWEILER, MAYLINDA		
Address	1630 SUMMERLAND AVE.		
City-State-Zip:	WINTER PARK FL 32789		

Certificate of Status Desired: No

FILED Jan 08, 2015 Secretary of State CC9415085444

> 01/08/2015 Date

Date