

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000049422

Entity Name: THE TAX DOCTOR OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

771 SW SOUTH MACEDO BLVD
PORT ST LUCIE, FL 34983

Current Mailing Address:

771 SW SOUTH MACEDO BLVD
PORT ST LUCIE, FL 34983

FEI Number: 04-3639930

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SIMPSON, JAMES
771 SW SOUTH MACEDO BLVD
PORT ST LUCIE, FL 34983 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

_____ Date

Officer/Director Detail :

Title P
Name SIMPSON, JAMES C
Address 771 S.W. SOUTH MACEDO BLVD.
City-State-Zip: PORT SAINT LUCIE FL 34983

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: JAMES SIMPSON

PRESIDENT

04/24/2013

Electronic Signature of Signing Officer/Director Detail

Date