

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000108728

Entity Name: CENTRAL FLORIDA QUALITY CARE SERVICES, INC.

Current Principal Place of Business:

933 LEE RD, STE 320
ORLANDO, FL 32810

Current Mailing Address:

933 LEE RD, STE 320
ORLANDO, FL 32810

FEI Number: 20-1375748

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRIFFON, VECHEL
637 CHEVIOT CT.
APOPKA, FL 32712 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 GRIFFON, VECHEL
Address 637 CHEVIOT CT.
City-State-Zip: APOPKA FL 32712

Title VP
Name GRIFFON, DINA R II
Address 933 LEE RD, STE 320
City-State-Zip: ORLANDO FL 32810

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: VECHEL GRIFFON

PRESIDENT

03/20/2014

Electronic Signature of Signing Officer/Director Detail

Date