

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L22279

FILED  
Feb 07, 2012  
Secretary of State

Entity Name: EAST CENTRAL FLORIDA SERVICES, INC.

**Current Principal Place of Business:**

4550 DEER PARK RD  
SAINT CLOUD, FL 34773 US

**New Principal Place of Business:**

**Current Mailing Address:**

50 E. NORTH TEMPLE 2WW  
SALT LAKE CITY, UT 84150 US

**New Mailing Address:**

FEI Number: 59-2996410      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PAYNE, JAMES B  
13754 DESERET LANE  
SAINT CLOUD, FL 34773 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: ST  
Name: KNIGHT, JESS  
Address: 139 EAST SOUTH TEMPLE  
City-St-Zip: SALT LAKE CITY, UT 84111

Title: D  
Name: JACOBSEN, ERIK  
Address: 13754 DESERET LANE  
City-St-Zip: ST CLOUD, FL 34773

Title: V  
Name: COON, TYLER  
Address: 13754 DESERET LANE  
City-St-Zip: ST CLOUD, FL 34773

Title: DCP  
Name: GENHO, PAUL C  
Address: 139 EAST SOUTH TEMPLE  
City-St-Zip: SALT LAKE CITY, UT 84111

Title: ASAT  
Name: WALKER, JEFF  
Address: 13754 DESERET LANE  
City-St-Zip: ST CLOUD, FL 34773

Title: D  
Name: LAMBERT, GLEN L  
Address: 139 E SOUTH TEMPLE  
City-St-Zip: SALT LAKE CITY, UT 84111

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: JESS KNIGHT

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02/07/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date