

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2005 08:00 AM
Secretary of State

DOCUMENT # F13265 1. Entity Name KESSLER AND GEHMAN ASSOCIATES, INC.	
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Principal Place of Business 507 NW 60TH ST, #C GAINESVILLE, FL 32607	Mailing Address 507 NW 60TH ST, #C GAINESVILLE, FL 32607
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01202005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2048959	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent TOVACH, WALTER M 5011 NW 8TH AVE GAINESVILLE, FL 32605
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DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reconstituting) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT KESSLER, WJ 507 NW 60TH ST., #C GAINESVILLE, FL 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS GEHMAN, ROBERT JR 507 NW 60TH ST., #C GAINESVILLE, FL 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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UD00000208580
02/01/05-80091-024 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT GEHMAN, JR. *Robert Gehman Jr* **1/20/05** **352-332-3157**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #