

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000153605

**Entity Name:** SHAFER FINANCIAL INC

**Current Principal Place of Business:**

6 ON THE COMMON  
#5  
LYME, NH 03768

**FILED**  
**Mar 08, 2017**  
**Secretary of State**  
**CC4816896427**

**Current Mailing Address:**

PO BOX 132  
LYME, NH 03768 US

**FEI Number:** 20-8056320

**Certificate of Status Desired:** No

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

WEBER, JAMES C  
6600 4TH ST. N  
SUITE 101  
ST PETERSBURG, FL 33702 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, T  
Name SHAFER, DAVID K PHD  
Address 6 ON THE COMMON  
#5  
City-State-Zip: LYME NH 03768

*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:** DAVID SHAFER

**PRESIDENT**

**03/08/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date