

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 29, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # 689346**

1. Entity Name  
**FESSEL, JACOBSON, MURPHY, INC.**



Principal Place of Business  
**1631 DEL PRADO BLVD  
STE 407  
CAPE CORAL, FL 33990**

Mailing Address  
**1631 DEL PRADO BLVD  
STE 407  
CAPE CORAL, FL 33990**



02012008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2042754**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**FESSEL, RICHARD C.  
118 SE 38TH TERR  
CAPE CORAL, FL 33904**

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	FESSEL, RICHARD C.
STREET ADDRESS	118 SE 38TH TERR
CITY-ST-ZIP	CAPE CORAL, FL 33904
TITLE	STD
NAME	FESSEL, JENNIFER J.
STREET ADDRESS	118 SE 38TH TERR
CITY-ST-ZIP	CAPE CORAL, FL 33904
TITLE	D
NAME	KLEINMANN, ELISABETH A
STREET ADDRESS	15090 N. PEBBLE LANE
CITY-ST-ZIP	FORT MYERS, FL 33912
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000932014  
05/22/08-80038-018 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Richard C. Fessel* 2-20-08

339-574-5564