## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 829601** 

Entity Name: SCHMELZER SALES ASSOCIATES, INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6211 N 56TH STREET TAMPA, FL 33610 US

Current Mailing Address: New Mailing Address:

P.O. BOX 16457 406 PINEHURST AVE. SO TAMPA, FL 336876457 US TAMPA, FL 33617 US

FEI Number: 71-0355734 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SCHMELZER, G., RICHARD, JR.

6211 N 56TH STREET

TAMPA, FL 33610 US

SCHMELZER, KATHRYNE B MS
406 PINEHURST AVE SO
TAMPA, FL 33617 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: KATHRYNE B. SCHMELZER 04/28/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition () Delete Title: SCHMELZER, G.R., JR SCHMELZER, KATHRYNE B MS Name: Name: 406 PINEHURST AVE 406 PINEHURST AVE Address: Address: City-St-Zip: TEMPLE TERR, FL City-St-Zip: TEMPLE TERR, FL 33617

Title: VD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 SCHMELZER, DONNA R.
 Name:

 Address:
 11 CHAPARRAL LANE
 Address:

 City-St-Zip:
 LITTLE ROCK, AR
 City-St-Zip:

Title: STD (X) Delete Title: ( ) Change ( ) Addition

Name:SCHMELZER, KATHRYNE BName:Address:406 PINEHURST AVEAddress:City-St-Zip:TEMPLE TERR, FLCity-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: KATHRYNE B. SCHMELZER SEC 04/28/2009

Electronic Signature of Signing Officer or Director

Date