

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 26, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # F37555**

1. Entity Name  
**WITZEL & ASSOCIATES INC.**



Principal Place of Business

3111 UNIVERSITY DR  
SUITE 700  
CORAL SPRINGS, FL 33065 US

Mailing Address

3111 UNIVERSITY DRIVE  
SUITE 700  
CORAL SPRINGS, FL 33065 US



04242007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-2113671</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

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

WITZEL, ROBERT C  
7459 NW 34 ST  
LAUDERHILL, FL 33319

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	VD
NAME	SCHMIDT, JOANNE M
STREET ADDRESS	9451 NW 44TH PLACE
CITY-ST-ZIP	CORAL SPRINGS, FL

TITLE	PD
NAME	WITZEL, ROBERT C
STREET ADDRESS	7459 N.W. 34TH ST.
CITY-ST-ZIP	LAUDERHILL, FL

TITLE	TS
NAME	WITZEL, ROBERT C.
STREET ADDRESS	7459 NW 34TH STREET
CITY-ST-ZIP	LAUDERHILL, FL

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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05/09/07-80061-005 150.00

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:** **ROBERT C. WITZEL**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/24/07**  
Date

**954-340-6670**  
Daytime Phone #