

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 28, 2004 08:00 AM
Secretary of State

DOCUMENT # F53878

1. Entity Name
RICHARD E. SHIELD, P.A.



Principal Place of Business
**12670 NEW BRITTANY BLVD, #201
SUITE 201
FT MYERS, FL 33907**

Mailing Address
**12670 NEW BRITTANY BLVD, #201
201
FT MYERS, FL 33907 US**

DO NOT WRITE IN THIS SPACE



01072004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2131935

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**SHIELD, RICHARD E
12670 NEW BRITTANY BLVD, SUITE 201
FT. MYERS, FL 33907**

**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, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE
SD
NAME
SHIELD, RICHARD E
STREET ADDRESS
12670 NEW BRITTANY, #201
CITY- ST- ZIP
FT MYERS, FL

TITLE
PT
NAME
SHIELD, RICHARD E
STREET ADDRESS
12670 NEW BRITTANY, #201
CITY- ST- ZIP
FT MYERS, FL

TITLE
V
NAME
HESLOP, NANCY F
STREET ADDRESS
12670 NEW BRITTAN, #201
CITY- ST- ZIP
FT MYERS, FL

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

U000000019543
01/23/04-80029-011 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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:

Richard E. Shield
RICHARD E. SHIELD

1/15/04
1/15/04 239-936-6699

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #