

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F61453

FILED  
Jan 03, 2012  
Secretary of State

**Entity Name:** SCHALCK SERVICES, INC.

**Current Principal Place of Business:**

17350 RIVERSTONE DR.  
LUTZ, FL 33558 US

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 915  
LUTZ, FL 33548 US

**New Mailing Address:**

FEI Number: 59-2151952

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHALCK, WILLIAM F.  
17350 RIVERSTONE DR.  
LUTZ, FL 33558 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PC  
Name: SCHALCK, WILLIAM F  
Address: 17350 RIVERSTONE DR  
City-St-Zip: LUTZ, FL 33558

Title: S  
Name: SCHALCK, LINDA S  
Address: 17350 RIVERSTONE DR  
City-St-Zip: LUTZ, FL 33558

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: WILLIAM F. SCHALCK

PC

01/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date