

# **2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# H74049

**FILED**  
**Apr 13, 2009**  
**Secretary of State**

**Entity Name:** SCHULER PACKAGING AND DESIGN, INC.

**Current Principal Place of Business:**

401 E. OAKRIDGE RD.  
ORLANDO, FL 32809 US

**New Principal Place of Business:**

**Current Mailing Address:**

401 E. OAKRIDGE RD.  
ORLANDO, FL 32809 US

**New Mailing Address:**

**FEI Number:** 59-2568079      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LEBLANC, JOAN  
401 E. OAKRIDGE RD.  
ORLANDO, FL 32809 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: P ( ) Delete  
Name: SCHULER, VALENTINE IV  
Address: 404 FRIAR RD  
City-St-Zip: WINTER PARK, FL 32792

Title: VP ( ) Delete  
Name: LEBLANC, JOAN S  
Address: 7 BROADWAY COURT  
City-St-Zip: ORLANDO, FL 32803

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: LEBLANC, JOAN S  
Address: 7 BROADWAY COURT  
City-St-Zip: ORLANDO, FL 32803

Title: VP (X) Change ( ) Addition  
Name: SCHULER, VALENTINE IV  
Address: 404 FRIAR RD  
City-St-Zip: WINTER PARK, FL 32792

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: JOAN S. LEBLANC

PRES

04/13/2009

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

\_\_\_\_\_  
Date