

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# J24978

FILED  
Apr 27, 2002 8:00 AM  
Secretary of State

Entity Name: DR. SHIFFER LABORATORIES, INC.

## Current Principal Place of Business:

12669 COLD STREAM DR.  
FT. MYERS, FL 33912 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 50609  
FT. MYERS, FL 33994 US

## New Mailing Address:

FEI Number: 59-2688402

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOORE, JERRY R.  
12669 COLD STREAM DR  
FORT MYERS, FL 33912 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: MOORE, JERRY R.,  
Address: 12669 COLD STREAM DR  
City-St-Zip: FT. MYERS, FL 33912

Title: S ( ) Delete  
Name: MOORE, LINDA J.,  
Address: 12669 COLD STREAM DR.  
City-St-Zip: FT MYERS, FL 33912

Title: D ( ) Delete  
Name: CHESNUT, PATTI ANN  
Address: 137 GIBSON STREET  
City-St-Zip: FT MYERS, FL 33905

Title: D ( ) Delete  
Name: MOORE, D. SCOTT  
Address: 496 N.W. FLETCHER ST.  
City-St-Zip: PORT CHARLOTTE, FL

Title: D ( ) Delete  
Name: MOORE, STEVEN L.  
Address: 4351 RIVER GROVE LANE  
City-St-Zip: FT. MYERS, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

PT

04/27/2002

Electronic Signature of Signing Officer or Director

Date