

**2005 FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 28, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000110546

1. Entity Name

OFFICE ENVIRONMENT CENTER, INC.



Principal Place of Business

1601 N.W. 80 BOULEVARD
GAINESVILLE, FL 32606

Mailing Address

1601 N.W. 80 BOULEVARD
GAINESVILLE, FL 32606



01192005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

41-2030758

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SALTER, JAMES D
703 N.E. FIRST STREET
GAINESVILLE, FL 32601

**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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SALTER, WILLIAM E JR
STREET ADDRESS	2345 N. WATERSEDGE DRIVE
CITY- ST- ZIP	CRYSTAL RIVER, FL 34429
TITLE	VP
NAME	SALTER, DAVID P
STREET ADDRESS	411 S.W. 117TH STREET
CITY- ST- ZIP	GAINESVILLE, FL 32608
TITLE	T
NAME	SALTER, HELEN
STREET ADDRESS	2345 N. WATERSEDGE DRIVE
CITY- ST- ZIP	CRYSTAL RIVER, FL 34429
TITLE	S
NAME	SALTER, VICKI
STREET ADDRESS	411 SW 117TH STREET
CITY- ST- ZIP	GAINESVILLE, FL 32608
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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01/28/05-80036-009 150.00

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12. I hereby certify that the information supplied with this filing does not qualify 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 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-27-2005

Date

352-332-1192

Daytime Phone #