

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90091 044 ***150.00

DOCUMENT # P00000112892					
1. Entity Name GEORGE SCHULZ, PH.D., AND ASSOCIATES, P.A.					
Principal Place of Business 5738 CANTON COVE SUITE 110 WINTER SPRINGS, FL 32708			Mailing Address 5738 CANTON COVE SUITE 110 WINTER SPRINGS, FL 32708		
2. Principal Place of Business - No P.O. Box # 1806 TOWN PLAZA CT Suite, Apt. #, etc. WINTER SPRINGS City & State FL		3. Mailing Address 1806 TOWN PLAZA CT Suite, Apt. #, etc. WINTER SPRINGS City & State FL			
Zip 32708		Country SEMINOLE		04302007 Chg-P CR2E034 (12/06)	
4. FEI Number 59-3687938				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent SCHULZ, GEORGE 5738 CANTON COVE SUITE 110 WINTER SPRINGS, FL 32708	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1806 TOWN PLAZA CT City WINTER SPRINGS FL Zip Code 32708				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution. <input type="checkbox"/>			
10. OFFICERS AND DIRECTORS					
TITLE	PST	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Delete
		SCHULZ, GEORGE	5738 CANTON COVE SUITE 110	WINTER SPRINGS, FL 32708	
					<input type="checkbox"/> Delete
					<input type="checkbox"/> Delete
					<input type="checkbox"/> Delete
					<input type="checkbox"/> Delete
					<input type="checkbox"/> Delete
					<input type="checkbox"/> Delete
					<input type="checkbox"/> Delete
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
	Schulz GEORGE	1806 TOWN PLAZA CT	WINTER SPRINGS, FL 32708		
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>George Schulz, PhD</u> 4/30/07 407-695-3664 <small>SIGNATURE AND TYPE OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR Date Daytime Phone #</small>					