

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 13, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000011342

1. Entity Name
VAN BUSKIRK, RYFFEL AND ASSOCIATES, INC.



Principal Place of Business
**100 ESTERO BLVD STE 434
FT MYERS BEACH, FL 33931**

Mailing Address
**100 ESTERO BLVD STE 434
FT MYERS BEACH, FL 33931**



01062007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
61-1442576

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**RYFFEL, CARLETON
100 ESTERO BLVD
STE 434
FORT MYERS BEACH, FL 33931**

**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 appointing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
VAN BUSKIRK, PAUL
100 ESTERO BLVD STE 434
FT MYERS BEACH, FL 33931**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
RYFFEL, CARLETON
100 ESTERO BLVD STE 434
FT MYERS BEACH, FL 33931**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
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CITY-ST-ZIP

U00000634503
02/22/07-80012-019-150.00

**DO NOT WRITE
IN THIS SPACE**

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:

Carleton Ryffel CARLETON RYFFEL 01/06/07 239 463-3929

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #