

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 01, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000125223

1. Entity Name
DENNIS W. SCHULTZ, INC.



Principal Place of Business
18120 ROYAL HAMMOCK BLVD
NAPLES, FL 34114

Mailing Address
18120 ROYAL HAMMOCK BLVD
NAPLES, FL 34114



01172007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
54-2135541

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SCHULTZ, DENNIS W
18120 ROYAL HAMMOCK BLVD
NAPLES, FL 34114

**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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

U000000615063

02/06/07 00057 004 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD SCHULTZ, DENNIS W 18120 ROYAL HAMMOCK BLVD NAPLES, FL 34114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VARGAS, JOSE 314 PORTER ST NAPLES, FL 34113
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEREZ, JUAN 2180 52ND TERR., S.W. NAPLES, FL 34116
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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.

1/25/07