

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000028306

Entity Name: SCHUELE INVESTMENT, INC.

FILED
Jun 26, 2009
Secretary of State

Current Principal Place of Business:

C/O PROMED INSTRUMENTS
4529 SW 16TH PLACE, #101
CAPE CORAL, FL 33904

New Principal Place of Business:

C/O PROMED INSTRUMENTS
4529 SE 16TH PLACE, #101
CAPE CORAL, FL 33904 US

Current Mailing Address:

C/O PROMED INSTRUMENTS
4529 SW 16TH PLACE, #101
CAPE CORAL, FL 33904

New Mailing Address:

C/O PROMED INSTRUMENTS
4529 SE 16TH PLACE, #101
CAPE CORAL, FL 33904 US

FEI Number: 20-2173590

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHUELE, EDGAR
C/O PROMED INSTRUMENTS
4529 SW 16TH PLACE, #101
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

MCDONALD, SANDRA L VP OPER
C/O PROMED INSTRUMENTS
4529 SE 16TH PLACE, #101
CAPE CORAL, FL 33904 US

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: SANDRA L. MCDONALD

06/26/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHUELE, EDGAR
Address: 4529 SE 16TH PLACE, #101
City-St-Zip: CAPE CORAL, FL 33904

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change () Addition
Name: SCHUELE, MATTHIAS E D
Address: 4529 SE 16TH PLACE, #101
City-St-Zip: CAPE CORAL, FL 33904 US

Title: MR. () Change (X) Addition
Name: SCHUELE, CHRISTIAN D
Address: 4529 SE 16TH PLACE, #101
City-St-Zip: CAPE CORAL, FL 33904 US

Title: MR. () Change (X) Addition
Name: SCHUELE, THOMAS D
Address: 4529 SE 16TH PLACE, #101
City-St-Zip: CAPE CORAL, FL 33904 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MATTHIAS E. SCHUELE

D

06/26/2009

Electronic Signature of Signing Officer or Director

Date