

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90449 040 ***150.00

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1. Entity Name
ROBERT HANSELMAN, AIA ARCHITECT, PA



Principal Place of Business
9316 SW 12 AVENUE
GAINESVILLE, FL 32607-3215

Mailing Address
9316 SW 12 AVENUE
GAINESVILLE, FL 32607-3215



04192007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1066357	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HANSELMAN, ROBERT
9316 SW 12 AVENUE
GAINESVILLE, FL 32607-3215

**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 Robert W. Hanselman
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4.27.2007

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	D
NAME	HANSELMAN, ROBERT
STREET ADDRESS	9316 SW 12 AVENUE
CITY-ST-ZIP	GAINESVILLE, FL 326073215

TITLE	D
NAME	HANSELMAN, ELIZABETH
STREET ADDRESS	9316 SW 12 AVENUE
CITY-ST-ZIP	GAINESVILLE, FL 326073215

TITLE	
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CITY-ST-ZIP	

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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: Robert W. Hanselman Robert W. Hanselman 4.27.2007 3523327982
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #