


# 2005 FOR PROXY CORPORATION ANNUAL REPORT

1092

DOCUMENT # P04000064884

1. Entity Name  
NADIAN, INC.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 JUL 22 AM 10: 52

Principal Place of Business  
2398 SOUTH WEST OAKRIDGE ROAD  
PALM CITY, FL 34990

Mailing Address  
2398 SOUTH WEST OAKRIDGE ROAD  
PALM CITY, FL 34990

02/22/05 90019001 15825



2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

02012005 Chg-P CR2E034 (10/03)

4. FEI Number  
65-1224287

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
SIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145

7. Name and Address of New Registered Agent  
Name Robert L. Schellenberg Jr.  
Street Address (P.O. Box Number is Not Acceptable)  
1038 S.E. Ocean Blvd, Suite B  
City Stuart FL Zip Code 34996

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

9. SIGNATURE \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	PSTD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SCELLENBERG, ROBERT L JR			NAME			
STREET ADDRESS	2398 SOUTH WEST OAKRIDGE ROAD			STREET ADDRESS			
CITY - ST - ZIP	PALM CITY, FL 34990			CITY - ST - ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY - ST - ZIP				CITY - ST - ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY - ST - ZIP				CITY - ST - ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY - ST - ZIP				CITY - ST - ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY - ST - ZIP				CITY - ST - ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 L. Schellenberg Jr. Date: 2/8/2005 Daytime Phone: 772-288 2008



CERTIFIED PUBLIC  
ACCOUNTANTS  
& ASSOCIATES

ACCOUNTING, BUSINESS  
AND TAX ADVISORS

33 FLAGLER AVE.  
STUART, FL 34994  
(772) 283-2356  
(772) 287-1887 FAX

SUITE 102  
270S. CENTRAL BLVD.  
JUPITER, FL 33458  
(561) 427-0300  
(561) 427-0301 FAX

GORDON O. PROCTOR, C.P.A.  
T. MICHAEL CROOK, C.P.A.  
NANCY B. CROWDER - M<sup>C</sup>COY, C.P.A.  
KEVIN M. PAYNE, C.P.A.  
TODD J. LAYCOCK, C.P.A.  
LAURIE D. COPELAND, C.P.A.  
WAYNE S. SANDERS, C.P.A.  
APRIL A. HICKS, CSEP  
T. J. LEAHY, C.P.A.  
CHRISTINE M. MYERS, C.P.A., C.V.A.  
RONALD JACOBSON

20f2

July 19, 2005

Florida Department of State  
Division of Corporations  
P.O. Box 6198  
Tallahassee, FL 32314-6198

RE: Document #P04000064884  
Nadian, Inc.

Dear Sir/Madam:

Enclosed please find our corrected 2005 Annual Report. Per my discussion with your Department today, this is in response to your letter of March 6, 2005 asking for the completion of Box 4, Federal Identification Number.

That letter was never delivered to our office by the Post Office.

Please waive the late fee as the report and fee of \$158.75 were filed in a timely manner. We have enclosed a copy of the cancelled check dated February 2005.

Sincerely,

Gordon Proctor, CPA

GP/dp

Enclosures

MEMBER:

INTERNATIONAL GROUP  
OF ACCOUNTING FIRMS  
ASSOCIATED OFFICES  
IN PRINCIPAL U.S. AND  
INTERNATIONAL CITIES

DIVISION FOR C.P. A. FIRMS  
AMERICAN INSTITUTE  
OF CERTIFIED PUBLIC  
ACCOUNTANTS

FLORIDA INSTITUTE  
OF CERTIFIED PUBLIC  
ACCOUNTANTS