

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2005 8:00 am
Secretary of State

03-14-2005 90116 045 ***150.00

DOCUMENT # P04000146858

1. Entity Name
VERTICAL ENTERPRISE, INC.



Principal Place of Business
**5000 U.S. HIGHWAY 17
SUITE 18, #301
ORANGE PARK, FL 32003-8229**

Mailing Address
**5000 U.S. HIGHWAY 17
SUITE 18, #301
ORANGE PARK, FL 32003-8229**

50026306



03082005 Chg-P CR2E034 (10/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
20-1913877

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BRANT, ABRAHAM, REITER, ET AL, P.A.
50 NORTH LAURA STREET
SUITE 2750
JACKSONVILLE, FL 32202**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 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 **D** ☐ Delete
NAME **IGNELZI, EMERIC JOSEPH JR.**
STREET ADDRESS **5000 U.S. HIGHWAY 17, SUITE 18, #301**
CITY-ST-ZIP **ORANGE PARK, FL 320038229**

TITLE **P/D** ☒ Change ☐ Addition
NAME **Ignelzi, Emeric Joseph Jr.**
STREET ADDRESS **5000 U.S. Highway 17, Suite 18, #301**
CITY-ST-ZIP **Orange Park, FL 320038229**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **Hechinger, Herta G.**
STREET ADDRESS **5453 H and R Subdivision Road**
CITY-ST-ZIP **Brazoria, TX 77422**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 empowerments.

SIGNATURE: **EMERIC J. IGNELZI JR.**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/05 (904) 215-4271
Date Daytime Phone #