

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000099045

1. Entity Name
SEMBLER PARTNERS, INC.



FILED

07 APR 27 AM 10:31

CLERK OF STATE
TALLAHASSEE, FLORIDA



04232007 Chg-P CR2E034 (12/06)

4. FEI Number
20-3639126
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CORPCO, INC.
2699 S BAYSHORE DRIVE 7TH FLOOR
MIAMI, FL 33133

7. Name and Address of New Registered Agent

Name
SEMBLER, GREGORY S.

Street Address (P.O. Box Number is Not Acceptable)
5858 CENTRAL AVENUE

City ST. PETERSBURG, FL Zip Code 33707

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 use 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

900101224809
05/02/07--01044--013 **158.75

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME SEMBLER, MELVIN F
STREET ADDRESS 5858 CENTRAL AVENUE
CITY-ST-ZIP ST PETERSBURG, FL 33707

TITLE D ☐ Delete
NAME SEMBLER, GREGORY S
STREET ADDRESS 5858 CENTRAL AVENUE
CITY-ST-ZIP ST PETERSBURG, FL 33707

TITLE D ☐ Delete
NAME SEMBLER, BRENT W
STREET ADDRESS 5858 CENTRAL AVENUE
CITY-ST-ZIP ST PETERSBURG, FL 33707

TITLE D ☐ Delete
NAME SHER, CRAIG H
STREET ADDRESS 5858 CENTRAL AVENUE
CITY-ST-ZIP ST PETERSBURG, FL 33707

TITLE D ☐ Delete
NAME FUQUA, JEFFREY
STREET ADDRESS 1450 S JOHNSON FERRY RD SUITE 100
CITY-ST-ZIP ATLANTA, GA 30319

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DC ☒ Change ☐ Addition
NAME SEMBLER, MELVIN F.
STREET ADDRESS 5858 CENTRAL AVENUE
CITY-ST-ZIP ST. PETERSBURG, FL 33707

TITLE D VTS ☒ Change ☐ Addition
NAME SEMBLER, GREGORY S.
STREET ADDRESS 5858 CENTRAL AVENUE
CITY-ST-ZIP ST. PETERSBURG, FL 33707

TITLE DVS ☒ Change ☐ Addition
NAME SEMBLER, BRENT W.
STREET ADDRESS 5858 CENTRAL AVENUE
CITY-ST-ZIP ST. PETERSBURG, FL 33707

TITLE DP ☒ Change ☐ Addition
NAME SHER, CRAIG H.
STREET ADDRESS 5858 CENTRAL AVENUE
CITY-ST-ZIP ST. PETERSBURG, FL 33707

TITLE DVS ☒ Change ☐ Addition
NAME FUQUA, JEFFREY S.
STREET ADDRESS 1450 S. JOHNSON FERRY RD SE, STE 100
CITY-ST-ZIP ATLANTA, GA 30319

TITLE S ☐ Change ☒ Addition
NAME WHEELER, RONALD P.
STREET ADDRESS 5858 CENTRAL AVENUE
CITY-ST-ZIP ST. PETERSBURG, FL 33707

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-07 727-384-6000

Date

Daytime Phone #

CRAIG H. SHER