

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000099045

1. Entity Name  
SEMBLER PARTNERS, INC.



FILED  
08 APR 30 AM 8:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
5858 CENTRAL AVENUE  
ST PETERSBURG, FL 33707

Mailing Address  
5858 CENTRAL AVENUE  
ST PETERSBURG, FL 33707



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02282008 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number

Applied For

20-3639126

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

SEMBLER, GREGORY S  
5858 CENTRAL AVENUE  
ST PETERSBURG, FL 33707

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, 2008 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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DC  
SEMBLER, MELVIN F  
5858 CENTRAL AVENUE  
ST PETERSBURG, FL 33707 ☐ Delete

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

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

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

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

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

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

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

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

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V  
WHEELER, RONALD P  
5858 CENTRAL AVENUE  
ST PETERSBURG, FL 33707 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
500127531805  
04/30/08--01057--025 \*\*158.75 ☐ Change ☐ Addition

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 information empowered.

SIGNATURE:

*Ronald P. Wheeler*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-08 727-384-6000  
Date Daytime Phone #