

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P05000108938

1. Entity Name
SASSE'S, INC.



FILED
Mar 22, 2007 08:00 A
Secretary of State

Principal Place of Business Mailing Address
11970 ROSEMONT DRIVE 11970 ROSEMONT DRIVE
FORT MYERS, FL 33913 US FORT MYERS, FL 33913 US



03142007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3606612 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

RANDOLPH, MICHAEL D ESQ.
1619 JACKSON STREET
FORT MYERS, FL 33901

**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

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, 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	P
NAME	SNYDERMAN, JERRY
STREET ADDRESS	11970 ROSMONT DRIVE
CITY-ST-ZIP	FORT MYERS, FL 33913
TITLE	S/T
NAME	SNYDERMAN, BARBARA
STREET ADDRESS	11970 ROSEMONT DRIVE
CITY-ST-ZIP	FORT MYERS, FL 33913
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000675148
03/30/07-80006-021 150.00

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-14-07 239-278-5544
Date Daytime Phone #