


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2006 8:00 am
Secretary of State

03-23-2006 90002 043 ***150.00

DOCUMENT # P05000122655 1. Entity Name STEPHANIE SCHMIEDECKE, P.A.																													
Principal Place of Business 265 SW MALONE DRIVE SUITE 111 LAKE CITY, FL 32608			Mailing Address 5333 SW 75TH STREET APT #U-126 GAINESVILLE, FL 32608																										
2. Principal Place of Business N/A		3. Mailing Address 62 Turkey Creek																											
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 																											
City & State 		City & State Alachua, FL		4. FEI Number 87-0753792																									
Zip 		Zip 32615		Country USA																									
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable																									
6. Name and Address of Current Registered Agent SCHMIEDECKE, STEPHANIE R O.D. 5333 SW 75TH STREET U-126 GAINESVILLE, FL 32608			7. Name and Address of New Registered Agent Name Stephanie Schmiedecke R, P.A. Street Address (P.O. Box Number is Not Acceptable) 62 Turkey Creek City Alachua FL Zip Code 32615																										
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 <u><i>Stephanie Schmiedecke</i></u> 03/15/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																											
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">PRES</td> <td style="width:10%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>SCHMIEDECKE, STEPHANIE R O.D.</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>5333 SW 75TH STREET APT #U-126</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>GAINESVILLE, FL 32608</td> <td></td> </tr> </table>			TITLE	PRES	<input type="checkbox"/> Delete	NAME	SCHMIEDECKE, STEPHANIE R O.D.		STREET ADDRESS	5333 SW 75TH STREET APT #U-126		CITY-ST-ZIP	GAINESVILLE, FL 32608		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">P.T.S</td> <td style="width:10%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>Stephanie Schmiedecke, P.A.</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>62 Turkey Creek</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>Alachua, FL 32615</td> <td></td> </tr> </table>			TITLE	P.T.S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	Stephanie Schmiedecke, P.A.		STREET ADDRESS	62 Turkey Creek		CITY-ST-ZIP	Alachua, FL 32615	
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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: <u><i>Stephanie Schmiedecke</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			03/15/06 832-541-9186 <small>Date Daytime Phone #</small>																										