


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 27, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P06000034957**  
 1. Entity Name  
**MICHAEL SHIEBLER INC.**



Principal Place of Business  
**223 DAHLIA CT  
 BRADENTON, FL 34212**

Mailing Address  
**223 DAHLIA CT  
 BRADENTON, FL 34212**



03232008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number **55-0917127** Applied For  Not Applicable

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

**6. Name and Address of Current Registered Agent**

**SHIEBLER, MICHAEL F  
 223 DAHLIA CT  
 BRADENTON, FL 34212**

**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 *Michael Shiebler* **Michael Shiebler** 3/20/08  
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 \$350.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SHIEBLER, MICHAEL F 223 DAHLIA CT BRADENTON, FL 34212
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SHIEBLER, DEBBY B 223 DAHLIA CT BRADENTON, FL 34212
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GOSSELIN, STEVEN 12535 CARA CARA LOOP BRADENTON, FL 34212
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 04/09/08-80115-009 150.00

**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: *Michael Shiebler* **Michael Shiebler** 3-20-08 779-94  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #