

2008 FOR PROFIT CORPORATION ANNUAL REPORT

2/. **FILED**
Mar 13, 2008 8:00 am
Secretary of State

02-25-2008 90068 033 ***150.00

DOCUMENT # P07000097078					
1. Entity Name JENNIFER L. FUNAIOLI-SHEEHAN, D.O. PA					
Principal Place of Business 1685 BARBER STREET SEBASTIAN, FL 32958			Mailing Address 1685 BARBER STREET SEBASTIAN, FL 32958		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 26-0874870	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent FUNAIOLI-SHEEHAN, JENNIFER L D.O. 1685 BARBER STREET SEBASTIAN, FL 32958				7. Name and Address of New Registered Agent	
Name				Street Address (P.O. Box Number is Not Acceptable)	
City				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 _____ (NOTE: Registered Agent signature required when renewing) 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	TITLE	NAME
	Chief Officer	Jennifer L. Funaioli-Sheehan	1685 Barber St. 32958		
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>Jennifer L. Funaioli-Sheehan DO PA</u> 2/22/08 772-589-5966					

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