

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000043136

Entity Name: SHEILA KAUFFMAN, PA

FILED  
Apr 06, 2011  
Secretary of State

**Current Principal Place of Business:**

106 WOODCREEK DR S  
SAFETY HARBOR, FL 34695 US

**New Principal Place of Business:**

**Current Mailing Address:**

106 WOODCREEK DR S  
SAFETY HARBOR, FL 34695 US

**New Mailing Address:**

FEI Number: 26-2511407

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KAUFFMAN, SHEILA  
106 WOODCREEK DR S  
SAFETY HARBOR, FL 34695 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KAUFFMAN, SHEILA  
Address: 106 WOODCREEK DR S  
City-St-Zip: SAFETY HARBOR, FL 34695 US

Title: T  
Name: KAUFFMAN, ROBERT  
Address: 106 WOODCREEK DR S  
City-St-Zip: SAFETY HARBOR, FL 34695 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SHEILA KAUFFMAN

PRES

04/06/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date