

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT

1995



DEPARTMENT OF STATE
CORPORATION
ANNUAL REPORT

DOCUMENT # P93000010509 (6)

ROBERT J. SENNETT, O.D., P.A.

ROBERT J. SENNETT, O.D., P.A.
10401 U.S. HWY 441
SUITE 216
LEESBURG, FL 34788
P.O. BOX 658
FRUITLAND PARK, FL 34731
10401 U.S. HWY 441
SUITE 216
LEESBURG, FL 34788

ROBERT J. SENNETT, O.D., P.A.
P.O. BOX 658
FRUITLAND PARK, FL 34731

APPROVED
FILED
SEP 11 1995

TALLAHASSEE, FLORIDA

2. Principal Office Location	2a. Mailing Address	4. FEI Number	3b. Date of Last Report
21. State: FL	26. State: FL	59-3165232	04/29/1994
22. City: Leesburg	27. City: Fruitland Park	5. Certificate of Status (Exempt) ☐	\$8.75 Additional Fee Required
23. Zip: 34788	28. Zip: 34731	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24. Country: USA	29. Country: USA	8. This corporation has liability for intangible tax under § 199.037, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

TAYLOR, L.E.
10401 U.S. HWY 441
SUITE 216
LEESBURG FL 34788

10. Name and Address of New Registered Agent

B1. Name	
B2. Street Address (P.O. Box Number is Not Applicable)	
B3. City	
B4. State	FL
B5. Zip Code	

11. Pursuant to the provisions of Sections 607.01 and 607.02, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent in part or in whole. If Florida Statutes change was authorized, the corporation's board of directors, thereby approved the appointment as registered agent. I am familiar with and accept the obligations of Section 607.02(9), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS	13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN '95
1. NAME: SENNETT, ROBERT J. 2. STREET ADDRESS: 10401 U.S. HWY 441 3. CITY: LEESBURG, FL 34788	1. NAME: SENNETT, ROBERT J. 2. STREET ADDRESS: P.O. BOX 658 3. CITY: FRUITLAND PARK, FL 34731
4. NAME: _____ 5. STREET ADDRESS: _____ 6. CITY: _____	4. NAME: _____ 5. STREET ADDRESS: _____ 6. CITY: _____
7. NAME: _____ 8. STREET ADDRESS: _____ 9. CITY: _____	7. NAME: _____ 8. STREET ADDRESS: _____ 9. CITY: _____
10. NAME: _____ 11. STREET ADDRESS: _____ 12. CITY: _____	10. NAME: _____ 11. STREET ADDRESS: _____ 12. CITY: _____
13. NAME: _____ 14. STREET ADDRESS: _____ 15. CITY: _____	13. NAME: _____ 14. STREET ADDRESS: _____ 15. CITY: _____
16. NAME: _____ 17. STREET ADDRESS: _____ 18. CITY: _____	16. NAME: _____ 17. STREET ADDRESS: _____ 18. CITY: _____
19. NAME: _____ 20. STREET ADDRESS: _____ 21. CITY: _____	19. NAME: _____ 20. STREET ADDRESS: _____ 21. CITY: _____

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and that the information included on this annual report is supplemental and not a part of the corporation's financial statements. I am familiar with and accept the obligations of Section 607.02(9), Florida Statutes, and that my name and address are correct for the reporting year.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER
Robert J. Sennett

5/5/95 (904) 787-3451

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FLORIDA DEPARTMENT OF
CORPORATION

1995



FLORIDA DEPARTMENT OF
CORPORATION
1995

APPROVED
8/15

DOCUMENT # P93000010929 (6)

AJS DEVELOPMENT CORPORATION

RECEIVED
JUL 10 1995

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JUL 10 1995

3800 AIRPORT PULLING RD. NORTH
NAPLES FL 33942

3800 AIRPORT PULLING RD. NORTH
NAPLES FL 33942

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/12/1993	3a. Date of Last Report 08/01/1994
4. FEI Number 65-0457678	Applied For ☐ Not Applicable ☐
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statute ☒ Yes ☐ No	

21. Name of Agent Andrew J. Saluan	26. Mailing Address 3800 AIRPORT PULLING RD. NORTH NAPLES FL 33942
22. State of Agent FL	27. State of Agent FL
23. City & State NAPLES FL	28. City & State NAPLES FL
24. Country USA	29. Country USA

9. Name and Address of Current Registered Agent SALUAN, ANDREW J 3800 AIRPORT PULLING ROAD NAPLES FL 33942	
81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL
	85. Zip Code

10. Name and Address of New Registered Agent	
81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL
	85. Zip Code

11. Pursuant to the provisions of Sections 607.0501 and 607.1508, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors, thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Sections 607.0501, Florida Statute.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	PSTD SALUAN, ANDREW J 3800 AIRPORT PULLING RD. NORTH NAPLES FL 33942	NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 199.032(b)(1), Florida Statute. I further certify that the information included on this annual report or supplemental annual 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 person or persons empowered to execute this report as required by Chapter 607, Florida Statute, and that my name appears in Block 12 or Block 13, if changed, on an attachment with an address.

SIGNATURE: X

SIGNATURE AND TYPED PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Andrew J. Saluan

5/8/95

818-619-412