

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 MAY -1 PM 1:26

DOCUMENT # P93000086935 (2)

1. Corporation Name

SHELLEY A. MEYERSON, L.C.S.W., P.A.

Principal Place of Business

Mailing Address

**2090 PALM BEACH LAKES BLVD.
SUITE 909
WEST PALM BEACH FL 33409**

**2090 PALM BEACH LAKES BLVD.
SUITE 909
WEST PALM BEACH FL 33409**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/21/1993

3a. Date of Last Report

05/19/1994

4. FEI Number

65-0455133

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 Statutes**

☐

Yes

☐

No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WILDER, FLOYD OLIVER
2090 PALM BEACH LAKES BLVD
STE - 911
WEST PALM BEACH FL 33409**

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 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**TITLE D
NAME MEYERSON, SHELLEY A
STREET ADDRESS 958 S. MILITARY TRAIL, SUITE 301
CITY- ST- ZIP W. PALM BEACH FL 33415**

11 TITLE

☐

Change

☐

Addition

**NAME
STREET ADDRESS
CITY- ST- ZIP**

12 NAME

13 STREET ADDRESS

14 CITY- ST- ZIP

☐

Change

☐

Addition

**NAME
STREET ADDRESS
CITY- ST- ZIP**

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY- ST- ZIP

☐

Change

☐

Addition

**TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP**

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY- ST- ZIP

☐

Change

☐

Addition

**TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP**

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY- ST- ZIP

☐

Change

☐

Addition

**TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP**

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY- ST- ZIP

☐

Change

☐

Addition

**TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP**

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY- ST- ZIP

☐

Change

☐

Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated 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 receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF MONITORING OFFICER OR DIRECTOR

REMITTED BY MAY 1

5/18/95

(407) 684-3909