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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

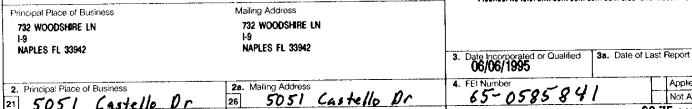
Secretary of State

DIVISION OF CORPORATIONS

1996

P95000045132 (4) **DOCUMENT #**

1. Corporation Name JEFFREY S. SCHELLING, P.A.



2. 21	Principal Place of Busine	stello Dr	2a. M	lailing Address	astello	Dr	4. FEI Number 65-058	5841	Not Applicable
	Suite, Apt. #, etc.) I C I I V I	S(uite, Apt. #, etc.			5. Certificate of Statu		\$8.75 Additional Fee Required
	City & State Nap Les	E/		ity & State Naples	FL		Election Campaign Trust Fund Contrib	· ·	\$5.00 May Be Added to Fees
23] 24]	Zφ 229UA	Country 25	Zi 29		Counti	Y	This corporation has Florida Statutes	as liability for intangible t	ax under s 199.032,
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			
	SCHELLING, JEFFF 732 WOODSHIRE L 1-9 NAPLES FL 33942	REY S LN			8 8 8	Street Addre	Suite 6	S. Schell Not Acceptable) Pello DA	85 Zig Code
						1	laples	FL	- 33490

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. 04/16/16 Seffrey S. Schelling President
Signature, typed in printed name of registered agent of the it applicable SIGNATURE . CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. JEFFREY S. SCHELLING Change Addition 27875 KINGS KEW S.W. BONITA SPRINGS, FL 33923 DELFTE 1.1 TITLE TITLE SCHELLING, JEFFREY S 1.2 NAME NAME 732 WOODSHIRE LN 1-9 1.3 STREET ADDRESS STREET ADDRESS NAPLES FL 33942 1.4 CITY - ST - ZIP CITY - \$1 - ZIP Change Addition DELETE 2.1 TITLE TITLE 2.2 NAME NAME 23 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3 1 TITLE THILE 3.2 NAME NAME 3.3. STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4 1 TITLE THILE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST- ZIP City-St-7P ☐ Charge ■ Addition DELETE 5.1 TITLE THILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY - ST - ZIF Charige Addition DELETE 6. 1 TITLE T-TLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CiTY-ST-ZiP

14. I do hereby certify that the information supplied with this filing is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(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 cath, 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 12 or Block 13 if changed, or on an attachment with an address.

Jeffrey Scholling President 04/26/96