2006 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P96000046512 02-08-2006 90002 042 ***150.00 1. Entity Name DONALD O. SCHULTZ, P.A. 60012933 Principal Place of Business Mailing Address -9500 LISTOW TERRACE -9500 LISTOW TERRACE* **BOYNTON BEACH, FL 33437** BOYNTON BEACH, FL -33437 2. Principal Place of Business 2755 S. BAY 3. Mailing Address 2755 2755 Suite, Apt. #, etc. Suite, Apt. #, etc. 01272006 Chg-P CR2E034 (11/05) SUITE SuiTE City & State City & State Applied For 4. FEI Number JORIDA USTZS 65-0682560 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent) & N B (\) SCHULTZ, DONALD O ESQ. Street Address (P.O. Box Number is Not Acceptable) 9500 LISTOW TERRACE **BOYNTON BEACH, FL 33**437 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 reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. DP TITLE ☐ Delete TITI F ☐ Change ☐ Addition SCHULTZ, DONALD O NAME NAME 2755 5 STREET ADDRESS 9500 LISTOW-TERRACE STREET ADDRESS BOYNTON BEACH, FL 33437 CITY-ST-ZIP CITY-ST-2IP TITLE TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7(P TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY_ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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. 589-2380

FILED Feb 08, 2006 8:00 am



Letter Number: 506A00006513

FLORIDA DEPARTMENT OF STATE Division of Corporations

January 30, 2006

DONALD O. SCHULTZ, P.A. 2755 South Bay Street, Suite H Eustis, FL 32726

SUBJECT: DONALD O. SCHULTZ, P.A. Ref. Number: P96000046512

We have received your check(s) totaling \$150.00; however it cannot be processed and is being returned for the following:

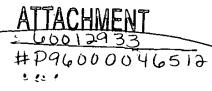
There was not a completed annual report/reinstatement application form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

After the corrections have been made, please return the report to: Division of Corporations, Annual Report/Uniform Business Report Section, P.O. Box 6327, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

PAMELA YARBOR OPS

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314



2755 South Bay Street, Suite H Eustis, Florida 32726

(352)-589-2380 Fax (352) 589-4683

PLEASE ADDRESS. NOTE CHANGE OF