

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P98000057374**

1. Entity Name  
**SELECTIVE FLORIDA PROPERTIES INC.**



Principal Place of Business

**1100 E. OAKLAND PARK BLVD.  
SUITE 108  
OAKLAND PARK, FL 33334 US**

Mailing Address

**1100 E. OAKLAND PARK BLVD.  
SUITE 108  
OAKLAND PARK, FL 33334 US**



04222008 No Chg-P CR2E034 (11/05)

4. FEI Number

**65-0849662**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

**FRASCA, DOMENICA  
1100 E. OAKLAND PARK BLVD.  
SUITE 108  
OAKLAND PARK, FL 33334**

**DO NOT WRITE  
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when relating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	FRASCA, DOMENICA
STREET ADDRESS	1100 E. OAKLAND PARK BLVD SUITE 108
CITY-ST-ZIP	OAKLAND PARK, FL 33334

TITLE	
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CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*April 23, 2008*

Date

Daytime Phone #