## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000003108

Entity Name: RONA LYNN SHERIDAN, P.A.

**FILED** Mar 08, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2500 WESTON ROAD SUITE 103 WESTON, FL 33331 **New Mailing Address: Current Mailing Address:** 14650 SW 29TH PLACE **DAVIE, FL 33330** FEI Number: 65-0888280 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SHERIDAN, RONA L P 14650 SW 29TH PLACE DAVIE, FL 33330 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition SHERIDAN, RONA L SHERIDAN, RONA L Name: Name: 2500 WESTON ROAD #103 14650 SW 29TH PLACE Address: Address: City-St-Zip: WESTON, FL 33331 City-St-Zip: **DAVIE, FL 33330** 

Title: Title: VD () Delete (X) Change ( ) Addition Name: SHERIDAN, PAUL J Name: SHERIDAN, PAUL J

14650 SW 29TH PLACE 14650 SW 29TH PLACE Address: Address: **DAVIE, FL 33330** DAVIE, FL 33330 City-St-Zip: City-St-Zip:

( ) Delete Title: (X) Change ( ) Addition Title:

SHERIDAN, STACEY L Name: SHERIDAN, STACEY L Name: 14650 SW 29TH PLACE 326 LAKEVIEW DRIVE #204 Address: Address:

City-St-Zip: **DAVIE, FL 33330** City-St-Zip: **DAVIE, FL 33330** 

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RONA L. SHERIDAN PD 03/08/2007