

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 09, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000073190

1. Entity Name
ROSELYN C. SHELLEY, P.A.



Principal Place of Business
**14350 SE 170TH ST.
WEIRSDALE, FL 32195**

Mailing Address
**P.O. BOX 599
WEIRSDALE, FL 32195**



01052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0940717** Applied For
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**HARRIS, MICHAEL D
1555 PALM BEACH LAKES BLVD, SUITE 310
WEST PALM BEACH, FL 33401**

**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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SHELLEY, ROSELYN C
STREET ADDRESS	PO BOX 599
CITY-ST-ZIP	WEIRSDALE, FL 32195
TITLE	VP
NAME	SHELLEY, ROSELYN C
STREET ADDRESS	PO BOX 599
CITY-ST-ZIP	WEIRSDALE, FL 32195
TITLE	S/T
NAME	SHELLEY, ROSELYN C
STREET ADDRESS	PO BOX 599
CITY-ST-ZIP	WEIRSDALE, FL 32195
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

UD00000380217
01/11/06-80005-010 150.00

**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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Roselyn C. Shelley, President

January 5, 2006