

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 02, 2006 08:00 A
Secretary of State**

DOCUMENT # P99000095559

1. Entity Name

D. BRIAN KUEHNER, P.A.



Principal Place of Business

4921 SOUTHFORK DR.
SUITE 4
LAKELAND, FL 33813

Mailing Address

4921 SOUTHFORK DR.
SUITE 4
LAKELAND, FL 33813



02272006 No Chg-P CR2E034 (11/05)

4. FEI Number

65-0983761

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

KUEHNER, D. BRIAN
4921 SOUTHFORK DR.
LAKELAND, FL 33813

**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 D
NAME KUEHNER, D. BRIAN
STREET ADDRESS 4921 SOUTHFORK DR. STE. 4
CITY-ST-ZIP LAKELAND, FL 33813

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1000000453714
03/14/06-80032-016 150.00

**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 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

Date

Daytime Phone #

D. Brian Kuehner 2/27/06 863-646-5728