

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mormann
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 AM 10:27

DOCUMENT # S23185

(9)

1. Corporation Name

GERALDINE SHEEHAN, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Office in Florida

**C/O GERALDINE SHEEHAN
4428 NE OCEAN BLVD.
JENSEN BEACH FL 34957**

Major Address

**C/O GERALDINE SHEEHAN
4428 NE OCEAN BLVD.
JENSEN BEACH FL 34957**

3. Date of Report
01/07/1991

3a. Date of Filing
03/07/1994

2. Filing Agent's Name

21. ☐ Not Applicable

2a. Mailing Address

26. ☐ Not Applicable

4. Filing Number
65-0235769

Applied For
☐ Not Applicable

22. ☐ Not Applicable

27. ☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

23. ☐ Not Applicable

28. ☐ Not Applicable

6. Election Campaign Financing
Trust Fund Contribution ☐

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

24. ☐ Not Applicable

25. ☐ Not Applicable

29. ☐ Not Applicable

30. ☐ Not Applicable

7. Does corporation have liability for damages for underpayment of taxes?
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SHEEHAN, GERALDINE
4428 NE OCEAN BLVD.
JENSEN BEACH FL 34957**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

84. State

FL

85. Zip Code

11. Pursuant to the provisions of the laws of the State of Florida relating to corporations, the above named corporation certifies this statement for the purpose of changing its registered office as indicated on page 1 of this report. It is hereby certified that the registered office of this corporation is located at the address indicated on page 1 of this report. It is further certified that the registered office of this corporation is located at the address indicated on page 1 of this report.

Signature

Date

12. Officer's Name and Address

13. Officer's Name and Address

14. Officer's Name and Address

15. Officer's Name and Address

16. Officer's Name and Address

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31. Officer's Name and Address

32. Officer's Name and Address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SECRETARY OF STATE

9-23-95

65-02357-11 BY