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FILED

Mar 13 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # **V12547**

(8)

1. Corporation Name  
**SELGER, INC.**

Principal Place of Business

**6386 4TH PLACE  
VERO BEACH FL 32960  
US**

Mailing Address

**3120 AVIATION BLVD  
VERO BEACH FL 32960**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 **6386 4th Place**  
Suite, Apt. #, etc.

27 City & State

28 **VERO BEACH FL**  
Zip Country

29 30 **32968**

3. Date Incorporated or Qualified

**02/06/1992**

4. FEI Number

**65-0325390**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00 Max Fee  
Added to Fees**

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

**COX, CYNTHIA L.  
1432 21ST ST  
SUITE A  
VERO BEACH FL 32960**

10. Name and Address of New Registered Agent

81 Name **Michael A. Selig**

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

**6386 4th Place**

83

84 City **VERO BEACH**

**FL**

85 Zip Code **32968**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent for both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*Michael A. Selig*  
Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

**3-10-98**

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE

NAME **SELIG, MICHAEL A.**  
STREET ADDRESS **3120 AVIATION BLVD.**  
CITY-ST-ZIP **VERO BEACH FL**

TITLE **D** ☐ DELETE

NAME **SELIG, MICHAEL A.**  
STREET ADDRESS **3120 AVIATION BLVD**  
CITY-ST-ZIP **VERO BEACH FL**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

**6386 4th PL**

**VERO BEACH FL 32968**

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

☐ Change ☐ Addition

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

☐ Change ☐ Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, by an attachment with an address.

SIGNATURE:

*Michael A. Selig*  
Signature typed or printed name of registered agent and title if applicable

**2-25-98**

**561 569 2183**

CR2E034 (10/97)