

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 11 PM 2:24

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # V67071 (3)

1. Corporation Name

JAN SCHUURMAN RIDLEY, P.A.

Principal Place of Business

**900 S HARBOR CITY BLVD
505
MELBOURNE FL 32901**

Mailing Address

**900 S HARBOR CITY BLVD
505
MELBOURNE FL 32901**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/24/1992

3a. Date of Last Report

05/13/1994

4. FEI Number

59-3142295

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

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

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 525 Strawbridge Avenue

2a. Mailing Address

26 525 Strawbridge Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

23 Melbourne, FL

City & State

28 Melbourne, FL

Zip

24 32901

Country

25 USA

Zip

29 32901

Country

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RIDLEY, JAN SCHUURMAN
930 S. HARBOR CITY BLVD
#505
MELBOURNE FL 32901**

81 Name

Jan Schuurman Ridley

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

525 Strawbridge Avenue

83

84 City

Melbourne

FL

85 Zip Code
32901

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, or 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

Jan Schuurman Ridley

April 4, 1995

(Signature, typed or printed name of registered agent and date of appointment)

(NOTE: Registered Agent signature required when constituting)

DATE

12. OFFICERS AND DIRECTORS

**D
NAME RIDLEY, JAN SCHUURMAN
STREET ADDRESS 930 S. HARBOR CITY BLVD #505
CITY ST ZIP MELBOURNE FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **D** ☒ Change ☐ Addition

**12 NAME RIDLEY, JAN SCHUURMAN
13 STREET ADDRESS 525 Strawbridge Avenue
14 CITY ST ZIP Melbourne, FL 32901**

21 TITLE ☐ Change ☐ Addition

**22 NAME
23 STREET ADDRESS
24 CITY ST ZIP**

31 TITLE ☐ Change ☐ Addition

**32 NAME
33 STREET ADDRESS
34 CITY ST ZIP**

41 TITLE ☐ Change ☐ Addition

**42 NAME
43 STREET ADDRESS
44 CITY ST ZIP**

51 TITLE ☐ Change ☐ Addition

**52 NAME
53 STREET ADDRESS
54 CITY ST ZIP**

61 TITLE ☐ Change ☐ Addition

**62 NAME
63 STREET ADDRESS
64 CITY ST ZIP**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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, or on an attachment with an address.

SIGNATURE:

Jan Schuurman Ridley

April 4, 1995 (407) 725-2600

(Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

(Date)

(Telephone Number)