

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000001693

**Entity Name:** ROBERT SHAFER & ASSOCIATES, P.A.

**Current Principal Place of Business:**

106 N PEARL ST.  
JACKSONVILLE, FL 32202

**Current Mailing Address:**

106 N. PEARL ST.  
JACKSONVILLE, FL 32202 US

**FEI Number:** 59-3428113

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SHAFER, ROBERT ESQ.  
106 N PEARL ST.  
JACKSONVILLE, FL 32202 US

*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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            PTS  
Name            SHAFER, ROBERT  
Address        106 N PEARL ST.  
City-State-Zip: JACKSONVILLE FL 32202

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROBERT L. SHAFER

**PRESIDENT**

**01/23/2013**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date