

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S98570

**Entity Name:** CELLEN, INC.

**Current Principal Place of Business:**

327 HOWARD AVE  
LAKELAND, FL 33815

**Current Mailing Address:**

327 HOWARD AVE  
LAKELAND, FL 33815

**FEI Number:** 59-3094404

**Certificate of Status Desired:** No

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

SHAFFER, ALLEN G.  
327 HOWARD AVE  
LAKELAND, FL 33815 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	PD	Title	STD
Name	SHAFFER, ALLEN	Name	SHAFFER, CELIA
Address	327 HOWARD AVE	Address	327 HOWARD AVE
City-State-Zip:	LAKELAND FL 33815	City-State-Zip:	LAKELAND FL 33815

*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:** CELIA SHAFFER

**SECT/TREAS**

**01/11/2013**

Electronic Signature of Signing Officer/Director Detail

Date