

2014 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
Name SHAFFER, ALLEN
Address 327 HOWARD AVE
City-State-Zip: LAKELAND FL 33815

Title STD
Name SHAFFER, CELIA
Address 327 HOWARD AVE
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

01/17/2014

Electronic Signature of Signing Officer/Director Detail

Date