

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004404

FILED
Apr 13, 2005
Secretary of State

Entity Name: SHUNAMMITE HOUSE INCORPORATED

Current Principal Place of Business:

14153 AMERO LANE
SPRING HILL, FL 34609

New Principal Place of Business:

Current Mailing Address:

14153 AMERO LANE
SPRING HILL, FL 34609

New Mailing Address:

FEI Number: 59-3684419

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZACCONE, PHYLLIS
14153 AMERO LANE
SPRING HILL, FL 34609 US

Name and Address of New Registered Agent:

ZACCONE, PHYLLIS
6419 TREEHAVEN DRIVE
SPRING HILL, FL 34606 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: PHYLLIS ZACCONE

04/13/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOTT, NONA A
Address: 14153 AMERO LANE
City-St-Zip: SPRING HILL, FL 34609

Title: VD () Delete
Name: ZACCONE, PHYLLIS
Address: 14153 AMERO LANE
City-St-Zip: SPRING HILL, FL 34609

Title: STD () Delete
Name: HOTT, LOUIS
Address: 14153 AMERO LANE
City-St-Zip: SPRING HILL, FL 34609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: ZACCONE, PHYLLIS
Address: 6419 TREEHAVEN DRIVE
City-St-Zip: SPRING HILL, FL 34606

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NONA A HOTT

PD

04/13/2005

Electronic Signature of Signing Officer or Director

Date