

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004669

FILED
Apr 24, 2012
Secretary of State

Entity Name: SHAREVIVAL INCORPORATED

Current Principal Place of Business:

4923 1/2 20TH AVENUE SOUTH
GULFPORT, FL 33707

New Principal Place of Business:

Current Mailing Address:

4917 20TH AVE. SOUTH
GULFPORT, FL 33707

New Mailing Address:

FEI Number: 83-0359746

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FECKNER, ROBERT
5626 25TH AVE S
GULFPORT, FL 33707 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PRES
Name: FECKNER, ROBERT
Address: 5626 25TH. AVENUE SOUTH
City-St-Zip: GULFPORT, FL 33707

Title: VP
Name: GERWER, KEITH
Address: 5405 20TH. AVENUE SOUTH
City-St-Zip: GULFPORT, FL 33707

Title: T
Name: GEDDES, ANDY
Address: 7400 37TH AVE N
City-St-Zip: ST PETERSBURG, FL 33710

Title: S
Name: EPSTEIN, ELIZA
Address: 6069 4TH. AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

Title: D
Name: BEHRENDT, LUCINDA
Address: 5404 20TH. AVENUE SOUTH
City-St-Zip: GULFPORT, FL 33707

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANDY GEDDES

T

04/24/2012

Electronic Signature of Signing Officer or Director

Date