

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004803

FILED
Jan 10, 2006
Secretary of State

Entity Name: THE DAVID AND LINDA SHAHEEN FOUNDATION, INC.

Current Principal Place of Business:

C/O DAVID SHAHEEN
580 GONWABIE DR., P.O. BOX 973
CRYSTAL BAY, NV 89402

New Principal Place of Business:

Current Mailing Address:

C/O DAVID SHAHEEN
P.O. BOX 252
LOOKOUT MOUNTAIN, TN 37350

New Mailing Address:

FEI Number: 58-2489866 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERGER, MITCHELL W ESQ.
BERGER SINGERMANN
350 E. LAS OLAS BLVD., SUITE 1000
FORT LAUDERDALE, FL 33301 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: D () Delete
Name: SHAHEEN, DAVID
Address: 580 GONOWABIE DR., P.O. BOX 973
City-St-Zip: CRYSTAL BAY, NV 89402

Title: D () Delete
Name: SHAHEEN, LINDA
Address: 580 GONOWABIE DR., P.O. BOX 973
City-St-Zip: CRYSTAL BAY, NV 89402

Title: D () Delete
Name: MARTIN, DEL
Address: 133 CARNEGIE WAY SUITE 1200
City-St-Zip: ATLANTA, GA 30302

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: MARTIN, DEL
Address: 3520 PIEDMONT ROAD, SUITE 300
City-St-Zip: ATLANTA, GA 30305

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DAVID SHAHEEN

PRES

01/10/2006

Electronic Signature of Signing Officer or Director

_____ Date