2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000109431

Entity Name: SHORE PROTECTION, INC.

FILED Jan 03, 2005 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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27161 WHITMAN AVENUE 3495 DRANCE ST

HARBOR HEIGHTS, FL 33983 PORT CHARLOTTE, FL 33980

Current Mailing Address: New Mailing Address:

27161 WHITMAN AVENUE 3495 DRANCE ST

HARBOR HEIGHTS, FL 33983 PORT CHARLOTTE, FL 33980

FEI Number: 50-0006558 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TIMMONS, DOUGLAS TIMMONS, DOUGLAS 27161 WHİTMAN AVENUE 10046 SW RIVERVIEW CR. HARBOR HEIGHTS, FL 33983 US ARCADIA, FL 34269

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: 01/03/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition TIMMONS, DOUGLAS D TIMMONS, DOUGLAS D Name: Name: 27161 WHITMAN AVENUE 10046 SW RIVERVIEW CR. Address: Address: City-St-Zip:

HARBOR HEIGHTS, FL 33983 City-St-Zip: ARCADIA, FL 34269

Title: Title: (X) Change () Addition () Delete TIMMONS, JOAN M Name: TIMMONS, JOAN M Name: 27161 WHITMAN AVENUE 10046 SW RIVERVIEW CR Address: Address: HARBOR HEIGHTS, FL 33983 ARCADIA, FL 34269 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition

TIMMONS, TROY D Name: TIMMONS, TROY D Name: 3512 DISCOVERY A ST. 3512 DISCOVERY DR. Address: Address: City-St-Zip: HARBOR HEIGHTS, FL 33983 City-St-Zip: HARBOR HEIGHTS, FL 33983

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

Ρ SIGNATURE: DOUGLAS TIMMONS 01/03/2005