

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000130340

Entity Name: SCHAROUN BUILDERS INC.

FILED  
Apr 30, 2008  
Secretary of State

**Current Principal Place of Business:**

4387 SHAPPELL STREET  
PORT CHARLOTTE, FL 33948

**New Principal Place of Business:**

**Current Mailing Address:**

4387 SHAPPELL STREET  
PORT CHARLOTTE, FL 33948

**New Mailing Address:**

FEI Number: 30-0336497

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BUSINESS FILINGS INC  
1203 GOVERNORS SQUARE BLVD SUITE 101  
TALLAHASSEE, FL 323012960 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SCHAROUN, ANDREW  
Address: 4387 SHAPPELL STREET  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: V ( ) Delete  
Name: SCHAROUN, MICHAEL  
Address: 4387 SHAPPELL STREET  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: S ( ) Delete  
Name: KELLY, JESSICA  
Address: 4387 SHAPPELL STREET  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: T ( ) Delete  
Name: MOLINA, CAROL  
Address: 21032 DENISE AVE  
City-St-Zip: PORT CHARLOTTE, FL 33952

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREW SCHAROUN

P

04/30/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date