

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000133488

FILED  
May 01, 2009  
Secretary of State

Entity Name: SCHAROUN BUILDING, INC.

**Current Principal Place of Business:**

4387 SHAPPELL ST.  
PORT CHARLOTTE, FL 33948

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 27261  
EL JOBEAN, FL 33927

**New Mailing Address:**

FEI Number: 26-1611167      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SCHAROUN, MICHAEL  
4387 SHAPPELL STREET  
PORT CHARLOTTE, FL 33948      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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: SCHAROUN, MICHAEL  
Address: P.O. BOX 27261  
City-St-Zip: EL JOBEAN, FL 33927

Title: P ( ) Delete  
Name: SCHAROUN, ANDREW  
Address: P.O. BOX 27261  
City-St-Zip: EL JOBEAN, FL 33927

Title: S ( ) Delete  
Name: KELLY, JESSICA  
Address: P.O. BOX 27261  
City-St-Zip: EL JOBEAN, FL 33927

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: MICHAEL SCHAROUN

VP

05/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date