2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2006
Secretary of State

DOCUMENT# P93000060948

Entity Name: SHEEP, INC.

Current Principal Place of Business:

4500 BELVERDERE RD
STE A
WEST PALM BEACH, FL 33415 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 20076
WEST PALM BEACH, FL 33416

New Mailing Address:

FEI Number: 65-0431072 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SEWELL, JOHN R
336 PINE STREET
WEST PALM BEACH, FL 33407 US

Name and Address of New Registered Agent:

PLEASANTON, DAVID F
1840 FOREST HILL BLVD.
#205
WEST PALM BEACH, FL 33406 US

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: DAVID F. PLEASANTON 02/02/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SEWELL, EVELYN
Address: P.O. BOX 8273
City-St-Zip: WEST PALM BEACH, FL 33047

Title: VSTD ( ) Delete
Name: SHONK, DEBRA
Address: P.O. BOX 8275
City-St-Zip: WEST PALM BEACH, FL 33047

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SHONK, DEBRA
Address: 2470 WELLINGTON GREEN DR. # 306
City-St-Zip: WELLINGTON, FL 33414

Title: VSTD (X) Change ( ) Addition
Name: SHONK, MICHAEL
Address: 2470 WELLINGTON GREEN DR. # 306
City-St-Zip: WELLINGTON, FL 33414

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

SIGNATURE: DEBRA SHONK PD 02/02/2006
Electronic Signature of Signing Officer or Director Date