

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H92971

FILED  
Jan 15, 2009  
Secretary of State

Entity Name: SHARON MULVIE E.A., INC.

## Current Principal Place of Business:

2131 N.W. 16TH ST.  
CRYSTAL RIVER, FL 34428 US

## New Principal Place of Business:

## Current Mailing Address:

2131 N.W. 16TH ST.  
CRYSTAL RIVER, FL 34428 US

## New Mailing Address:

FEI Number: 59-2618348      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MULVIE, SHARON L VP  
2131 N.W. 16TH ST  
CRYSTAL RIVER, FL 34428 US

## Name and Address of New Registered Agent:

MULVIE, SHARON L P  
2131 N.W. 16TH ST  
CRYSTAL RIVER, FL 34428 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: SHARON L MULVIE

01/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: MULVIE, DAVID P  
Address: 2131 N.W. 16TH ST.  
City-St-Zip: CRYSTAL RIVER, FL 34428 US

Title: VP ( ) Delete  
Name: MULVIE, SHARON L  
Address: 2131 N.W. 16TH ST.  
City-St-Zip: CRYSTAL RIVER, FL 34428 US

Title: T ( ) Delete  
Name: HASTINGS, MELINDA  
Address: 2131 N.W. 16TH ST.  
City-St-Zip: CRYSTAL RIVER, FL 34428 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SVP (X) Change ( ) Addition  
Name: MULVIE, DAVID P  
Address: 2131 N.W. 16TH ST.  
City-St-Zip: CRYSTAL RIVER, FL 34428 US

Title: P (X) Change ( ) Addition  
Name: MULVIE, SHARON L  
Address: 2131 N.W. 16TH ST.  
City-St-Zip: CRYSTAL RIVER, FL 34428 US

Title: T (X) Change ( ) Addition  
Name: HASTINGS, MELINDA L  
Address: 2131 N.W. 16TH ST.  
City-St-Zip: CRYSTAL RIVER, FL 34428 US

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: SHARON L MULVIE

P

01/15/2009

Electronic Signature of Signing Officer or Director

Date