

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 394662

FILED  
Mar 26, 2004  
Secretary of State

Entity Name: SHANNON R. GINN CONSTRUCTION CO.

## Current Principal Place of Business:

2840 SW BEAR PAW TRAIL  
PALM CITY, FL 34990 US

## New Principal Place of Business:

## Current Mailing Address:

2840 SW BEAR PAW TRAIL  
PALM CITY, FL 34990 US

## New Mailing Address:

P.O. BOX 14517  
NORTH PALM BEACH, FL 33480 US

FEI Number: 59-1375046

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARY, JOHN W. III  
701 U.S. #1, SUITE 402  
NORTH PALM BEACH, FL 33408 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: PD ( ) Delete  
Name: GINN, SHANNON R  
Address: 2840 SW BEAR PAW TRAIL  
City-St-Zip: PALM CITY, FL 34990

Title: STD ( ) Delete  
Name: KING, PAMELA J,  
Address: 3295 SW SUNSET TRACE  
City-St-Zip: PALM CITY, FL

Title: VD ( ) Delete  
Name: GINN, DIANE A  
Address: 2840 SW BEAR PAW TRAIL  
City-St-Zip: PALM CITY, FL 34990

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: GINN, SHANNON R  
Address: P.O. BOX 14517  
City-St-Zip: NORTH PALM BEACH, FL 33480

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

Title: VD (X) Change ( ) Addition  
Name: GINN, DIANE A  
Address: P.O. BOX 14517  
City-St-Zip: NORTH PALM BEACH, FL 33480

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.

SIGNATURE: PAMELA KING

STD

03/26/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date