2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 420654

City-St-Zip:

KISSIMMEE, FL

Entity Name: SHORE'S, INC.

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 201-3 BROADWAY KISSIMMEE, FL 32741 **Current Mailing Address: New Mailing Address:** 201-3 BROADWAY KISSIMMEE, FL 32741 FEI Number: 59-1440201 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SHORE, HELEN W. 201-3 BROADWAY KISSIMMEE, FL 32741 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CROSS, HELEN S. Name: Name: 502 MABBETTE ST. Address: Address: City-St-Zip: KISSIMMEE FL., City-St-Zip: Title: Title: () Delete () Change () Addition SHORE, HELEN W. Name: Name: 720 CANTERBURY LANE Address: Address: KISSIMMEE FL., City-St-Zip: City-St-Zip: () Delete Title: Title: AS () Change () Addition BOWMAN, ELIZABETH Name: Name: 2610 CIMARRON Address: Address: City-St-Zip: JOHNSON CITY, TN City-St-Zip: Title: () Delete Title: () Change () Addition FARMER, PAULA J Name: Name: Address: 1009 NINTH COURT Address: City-St-Zip: PLEASANT GROVE, AL City-St-Zip: Title: AVP () Delete Title: () Change () Addition CROSS, GEORGE A Name: Name: 502 MABBETTE ST. Address: Address:

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.

City-St-Zip:

SIGNATURE: HELEN S CROSS VS 04/21/2009