

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 571503

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: SHIVER AIR OF BRANDON, INC.

## Current Principal Place of Business:

11710 HWY 92 EAST  
SEFFNER, FL 33584 US

## New Principal Place of Business:

11318 HWY 92 EAST  
SEFFNER, FL 33584 US

## Current Mailing Address:

P O BOX 402  
BRANDON, FL 335090402 US

## New Mailing Address:

FEI Number: 59-1823000      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHIVER, YOLANDA C.  
11710 HWY 92 EAST  
SEFFNER, FL 33584 US

## Name and Address of New Registered Agent:

SHIVER, BOBBY W  
11318 HWY 92 EAST  
SEFFNER, FL 33584 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: BOBBY W. SHIVER

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SHIVER, BOBBY W,  
Address: 1905 CAPRI RD  
City-St-Zip: VALRICO, FL 33594

Title: D ( ) Delete  
Name: SHIVER, YOLANDA,  
Address: 1905 CAPRI RD  
City-St-Zip: VALRICO, FL 33594

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: BOBBY W. SHIVER

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date