

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 582758

FILED  
Jan 07, 2008  
Secretary of State

Entity Name: CHARLOTTE TREASURE LANES, INC.

## Current Principal Place of Business:

1059 TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33953

## New Principal Place of Business:

## Current Mailing Address:

1059 TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33953

## New Mailing Address:

FEI Number: 59-1841075

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SHOPA, MICHAEL J.  
2491 BALTIC AVE.  
PORT CHARLOTTE, FL 33952 US

## Name and Address of New Registered Agent:

SHOPA, DANIEL J  
23387 WESTCHESTER BLVD  
PORT CHARLOTTE, FL 33980 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: DANIEL J SHOPA

01/07/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PDC ( ) Delete  
Name: SHOPA, MICHAEL J,  
Address: 2491 BALTIC AVE  
City-St-Zip: PT CHARLOTTE, FL 33952

Title: DS ( ) Delete  
Name: SHOPA, KATHLEEN A,  
Address: 2491 BALTIC AVE.  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: VTD ( ) Delete  
Name: SHOPA, DANIEL J,  
Address: 23387 WESTCHESTER BLVD  
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: D ( ) Delete  
Name: SHOPA, STEPHANIE A.,  
Address: 1316 TYROL TRAIL  
City-St-Zip: GOLDEN VALLEY, MN 55416

Title: D ( ) Delete  
Name: SHOPA, JOHN S.,  
Address: PO BOX 44298 N/A  
City-St-Zip: TUCSON, AZ 85733

Title: D ( ) Delete  
Name: MCMURRAY, MELANIE J  
Address: 616 VALENCIA RD  
City-St-Zip: VENICE, FL 34285

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: DANIEL J SHOPA

VTD

01/07/2008

Electronic Signature of Signing Officer or Director

Date