

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 666685

FILED  
Feb 22, 2011  
Secretary of State

Entity Name: SHINE AND COMPANY, INC.

**Current Principal Place of Business:**

25687 W. US HWY 27  
HIGH SPRINGS, FL 32643 US

**New Principal Place of Business:**

**Current Mailing Address:**

25687 W. US HWY 27  
HIGH SPRINGS, FL 32643 US

**New Mailing Address:**

FEI Number: 59-2066828

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHINE, GARY L  
1415 SW CR 138  
FT. WHITE, FL 32038 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SHINE, GARY L  
Address: 1415 SW CR 138  
City-St-Zip: FORT WHITE, FL 32038 US

Title: VST  
Name: SHINE, GARY J  
Address: 4608 NW 42ND STREET  
City-St-Zip: GAINESVILLE, FL 32606 US

Title: V  
Name: SHINE, MATTHEW S  
Address: 1441 SW CR 138  
City-St-Zip: FORT WHITE, FL 32038 US

Title: V  
Name: SHINE, DAVID M  
Address: 312 SW UNITY CT  
City-St-Zip: FORT WHITE, FL 32038 US

I hereby 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 all other like empowered.

SIGNATURE: GARY L. SHINE

PD

02/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date