

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 684011 (0)
1. Corporation Name
SHAW MANAGEMENT, INC.



Principal Place of Business
222 US HWY #1, STE 208
TEQUESTA FL 33469

Mailing Address
222 US HWY #1, STE 208
TEQUESTA FL 33469

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/13/1980	
21 Suite, Apt. #, etc.	22 City & State	23 Zip	24 Country	4. FEI Number 59-2023506	Applied For Not Applicable
25	26	27	28	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
29	30	31	32	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

SHAW, ROBERT J
40 OCEAN DRIVE
JUPITER FL 33469

222 U.S. Hwy. 1
Tequesta, Fl. 33469

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
			FL	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	12 NAME
PD	SHAW, ROBERT J	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	40 OCEAN DRIVE	13 STREET ADDRESS	222 U.S. Hwy. 1
CITY-ST-ZIP	JUPITER FL 33469	14 CITY-ST-ZIP	Tequesta, FL 33469
TITLE	NAME	21 TITLE	22 NAME
VP	SHAW, ASTA	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
STREET ADDRESS	10 OCEAN DRIVE	23 STREET ADDRESS	222 U.S. Hwy. 1
CITY-ST-ZIP	JUPITER FL 33469	24 CITY-ST-ZIP	Tequesta, Fl. 33469
TITLE	NAME	31 TITLE	32 NAME
		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
STREET ADDRESS		33 STREET ADDRESS	222 U.S. Hwy. 1
CITY-ST-ZIP		34 CITY-ST-ZIP	Tequesta, Fl.
TITLE	NAME	41 TITLE	42 NAME
		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
STREET ADDRESS		43 STREET ADDRESS	222 U.S. Hwy. 1
CITY-ST-ZIP		44 CITY-ST-ZIP	Tequesta, Fl.
TITLE	NAME	51 TITLE	52 NAME
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	NAME	61 TITLE	62 NAME
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Richard W. Souders, President & CEO, Shaw Management, Inc.

CR2E034 (10/97)