

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002557

Entity Name: SHANNON SYSTEMS, INC.

FILED  
Apr 29, 2005  
Secretary of State

## Current Principal Place of Business:

216 EAST 20TH AVE  
GULF SHORES, AL 36542

## New Principal Place of Business:

## Current Mailing Address:

29156 ONO BLVD  
ORANGE BEACH, AL 36561

## New Mailing Address:

29156 ONO BLVD  
ORANGE BEACH, AL 36561 US

FEI Number: 63-1159212

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHANNON, STEVE  
14180 PERDIDO KEY DRIVE  
PENSACOLA, FL 32507 US

## Name and Address of New Registered Agent:

SHANNON, STEVE  
13810 PERDIDO KEY DRIVE  
PENSACOLA, FL 32507 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: STEVE SHANNON

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: SHANNON, STEPHEN A  
Address: 29156 ONO BOULEVARD  
City-St-Zip: ORANGE BEACH, AL 36561

Title: DS ( ) Delete  
Name: SHANNON, SHIRLEY P  
Address: 29156 ONO BOULEVARD  
City-St-Zip: ORANGE BEACH, AL 36561

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: SHANNON, STEPHEN A  
Address: 29156 ONO BOULEVARD  
City-St-Zip: ORANGE BEACH, AL 36561 US

Title: DS (X) Change ( ) Addition  
Name: SHANNON, SHIRLEY P  
Address: 29156 ONO BOULEVARD  
City-St-Zip: ORANGE BEACH, AL 36561 US

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: STEPHEN A. SHANNON

DP

04/29/2005

Electronic Signature of Signing Officer or Director

Date