

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003353

Entity Name: SHORE VENTURES, INC.

FILED  
Feb 01, 2007  
Secretary of State

## Current Principal Place of Business:

645 GULF SHORES PKWY  
GULF SHORES, AL 36542

## New Principal Place of Business:

## Current Mailing Address:

1804 HERITAGE DRIVE  
GULF SHORES, AL 36542

## New Mailing Address:

PO BOX 937  
GULF SHORES, AL 36547

FEI Number: 20-1055058

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAPITAL CONNECTION, INC.  
417 E. VIRGINIA ST.  
STE. 1  
TALLAHASSEE, FL 323011283 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete  
Name: CORCORAN, KEVIN S  
Address: 1804 HERITAGE DRIVE  
City-St-Zip: GULF SHORES, AL 36542

Title: CD ( ) Delete  
Name: CORCORAN, KEVIN S  
Address: 1804 HERITAGE DRIVE  
City-St-Zip: GULF SHORES, AL 36542

Title: D ( ) Delete  
Name: CORCORAN, DENNIS P  
Address: 32 MARSH POINTE  
City-St-Zip: GULF SHORES, AL 36542

Title: D ( ) Delete  
Name: CORCORAN, MARY W  
Address: 1804 HERITAGE DRIVE  
City-St-Zip: GULF SHORES, AL 36542

## 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:

I hereby certify that the information supplied with this filing does not qualify for the 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: KEVIN S. CORCORAN

PVST

02/01/2007

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

\_\_\_\_\_  
Date