

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000004240

**FILED**  
**Apr 22, 2012**  
**Secretary of State**

**Entity Name:** SHAWN'S TOOLS INCORPORATED

**Current Principal Place of Business:**

3812 HAVEN AVENUE  
BACINE, WI 53405

**New Principal Place of Business:**

161 SUNWARD AVENUE  
PALM HARBOR, FL 34684

**Current Mailing Address:**

161 SUNWARD AVENUE  
PALM HARBOR, FL 34684

**New Mailing Address:**

**FEI Number:** 20-5189195      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ANDERSON, NICOLE  
161 SUNWARD AVENUE  
PALM HARBOR, FL 34684      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: ANDERSON, SHAWN  
Address: 161 SUNWARD AVENUE  
City-St-Zip: PALM HARBOR, FL 34684

Title: VD  
Name: ANDERSON, NICOLE  
Address: 161 SUNWARD AVENUE  
City-St-Zip: PALM HARBOR, FL 34684

Title: S  
Name: ANDERSON, ELIZABETH  
Address: 161 SUNWARD AVENUE  
City-St-Zip: PALM HARBOR, FL 34684

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: NICOLE ANDERSON

VD

04/22/2012

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

\_\_\_\_\_  
Date