


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2008 08:00 A
Secretary of State

| | |
|---|---|
| DOCUMENT # F96000004669 1. Entity Name SHAW RETAIL PROPERTIES, INC. |  |
|---|---|

Principal Place of Business
**616 E WALNUT AVE
DALTON, GA 30722-2128 US**

Mailing Address
**PO DRAWER 2128
MAIL DROP 061-04
DALTON, GA 30722-2128**



04042008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|------------------------------------|-------------------------------|
| 4. FEI Number 58-2242176 | Applied For Not Applicable |
|------------------------------------|-------------------------------|

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|---|--|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
|---|--|

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AS HOOPER, FREDERICK L III 1235 ARABIAN DRIVE DALTON, GA 30720 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVP DOBBINS, CHARLES N 1904 WYCLIFF DALTON, GA 30720 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PSTD EMBRY, GERALD R 4006 MILLSTONE CIRCLE ROCKY FACE, GA 30740 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D JACKSON, KENNETH G 5536 MOUNTAIN BREEZE DR CHATTANOOGA, TN 37421 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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05/07/08-80025-018 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Gerald R Embry 09Apr08 706-2783812