

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H03241

FILED  
Apr 07, 2009  
Secretary of State

Entity Name: SHANNON HOMES OF GAINESVILLE, INC.

## Current Principal Place of Business:

6250 NW 23RD ST  
SUITE 8  
GAINESVILLE, FL 32653 US

## New Principal Place of Business:

7208 WEST UNIVERSITY  
GAINESVILLE, FL 32607 US

## Current Mailing Address:

6250 NW 23RD ST  
SUITE 8  
GAINESVILLE, FL 32653 US

## New Mailing Address:

8424 NW 6TH AVENUE  
GAINESVILLE, FL 32607 US

FEI Number: 59-2415894

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILLIAMS, JAMES  
4424 N.W. 13TH ST., SUITE A-1  
GAINESVILLE, FL 32609 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: PT ( ) Delete  
Name: SHANNON, MICHAEL D.  
Address: 6250 NW 23RD ST SUITE 8  
City-St-Zip: GAINESVILLE, FL 32653

Title: VPD ( ) Delete  
Name: SHANNON, CATHY R.  
Address: 6250 NW 23RD ST SUITE 8  
City-St-Zip: GAINESVILLE, FL 32653

Title: ST ( ) Delete  
Name: RIVERS, MARGARET  
Address: 8424 NW 6TH AVE.  
City-St-Zip: GAINESVILLE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition  
Name: SHANNON, MICHAEL D.  
Address: 8424 NW 6TH AVENUE  
City-St-Zip: GAINESVILLE, FL 32607 US

Title: VPD (X) Change ( ) Addition  
Name: SHANNON, CATHY R.  
Address: 8424 NW 6TH AVENUE  
City-St-Zip: GAINESVILLE, FL 32607 US

Title: ST (X) Change ( ) Addition  
Name: RIVERS, MARGARET  
Address: 8424 NW 6TH AVE.  
City-St-Zip: GAINESVILLE, FL 32607 US

I hereby certify that the information supplied with this filing does not qualify 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: MARGARET RIVERS

S/T

04/07/2009

Electronic Signature of Signing Officer or Director

Date