

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H03241

**FILED**  
**Feb 03, 2011**  
**Secretary of State**

**Entity Name:** SHANNON HOMES OF GAINESVILLE, INC.

**Current Principal Place of Business:**

7126 WEST UNIVERSITY AVENUE  
GAINESVILLE, FL 32607 US

**New Principal Place of Business:**

**Current Mailing Address:**

8424 NW 6TH AVENUE  
GAINESVILLE, FL 32607 US

**New Mailing Address:**

**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

**OFFICERS AND DIRECTORS:**

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

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

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

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: MARGARET RIVERS

ST

02/03/2011

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

\_\_\_\_\_  
Date