

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J57923

FILED
Apr 05, 2006
Secretary of State

Entity Name: C & R SHARLO CORPORATION

Current Principal Place of Business:

6200 147 AVE., NO.
CLEARWATER, FL 33760

New Principal Place of Business:

Current Mailing Address:

6200 147 AVE., NO.
CLEARWATER, FL 33760

New Mailing Address:

FEI Number: 59-2786231

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICKERSON, ROY S SR
6200-147 AVE., NO.
CLEARWATER, FL 33760 US

Name and Address of New Registered Agent:

NICKERSON, SHARYL A
6200-147 AVE., NO.
CLEARWATER, FL 33760 US

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: SHARYL A. NICKERSON

04/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: NICKERSON, SHARYL A
Address: 6200 147TH AVENUE NORTH
City-St-Zip: CLEARWATER, FL

Title: PD (X) Delete
Name: NICKERSON, ROY S SR
Address: 6200-147 AVE., NO.
City-St-Zip: CLEARWATER, FL 33760

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SHARYL A. NICKERSON

SEC

04/05/2006

Electronic Signature of Signing Officer or Director

Date