

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J85993

Entity Name: SHUTTLE ACCOUNTING, INC.

FILED  
Feb 28, 2006  
Secretary of State

## Current Principal Place of Business:

% WILLIAM T. HARDY  
956 N.COCOA BLVD #1123  
COCOA, FL 32922

## New Principal Place of Business:

## Current Mailing Address:

% WILLIAM T. HARDY  
P O BOX 237  
COCOA, FL 32923

## New Mailing Address:

FEI Number: 59-2831251

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HARDY, WILLIAM T.  
956 N COCOA BLVD  
SUITE 1123  
COCOA, FL 32023 US

## Name and Address of New Registered Agent:

HARDY, WILLIAM T  
956 N COCOA BLVD  
SUITE 1123  
COCOA, FL 32023 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: WILLIAM T HARDY

02/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HARDY, WILLIAM T,  
Address: 62 BARTON BLVD.  
City-St-Zip: ROCKLEDGE, FL 32955

Title: D ( ) Delete  
Name: ASHER, GWENDOLYN E,  
Address: 135 VIRGINIA AVE.  
City-St-Zip: COCOA, FL 32922

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: HARDY, WILLIAM T  
Address: 62 BARTON BLVD.  
City-St-Zip: ROCKLEDGE, FL 32955

Title: D (X) Change ( ) Addition  
Name: ASHER, GWENDOLYN E  
Address: 136 VIRGINIA AVE.  
City-St-Zip: COCOA, FL 32922

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: GWEN ASHER

D

02/28/2006

Electronic Signature of Signing Officer or Director

Date