2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K84075

SHUE, MICHAEL,

7115 INDIAN BOW LN.

SARASOTA, FL 34240

Name:

Address:

City-St-Zip:

Entity Name: SHUE - KAUFFMAN INCORPORATED

FILED Mar 11, 2009 Secretary of State

Littly Na	ille. SHOE-N	AOFFWAN INCORPORATEL	,			
Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
2156 10TH SARASOT	1 ST A, FL 34237	US				
Current Mailing Address:			New Mailing Address:			
2156 10TH SARASOT	1 ST A, FL 34237	US				
FEI Number	: 65-0117772	FEI Number Applied For()	FEI Number Not App	icable () Certificate o	of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Regist	ered Agent:	
1645 FOX	N, KENTON S CREEK DR A, FL 34240	US				
	named entity see of Florida.	submits this statement for the	purpose of changing i	ts registered office or regi	stered agent, or both,	
SIGNATUI	RE:					
	Electron	ic Signature of Registered Ag	jent	Da	te	
Election Car	mpaign Financing	g Trust Fund Contribution ().				
OFFICER	S AND DIREC	TORS:	ADDITION	S/CHANGES TO OFFICE	ERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () SHUE, RICHAR 2546 RIVER RI SARASOTA, FL	DGE DRIVE	Title: Name: Address: City-St-Zip:	()Change()A	Addition	
Title: Name: Address: City-St-Zip:	SD () KAUFFMAN, KE 1645 FOX CRE SARASOTA, FL	EK DRIVE	Title: Name: Address: City-St-Zip:	()Change()A	Addition	
Title: Name: Address: City-St-Zip:	D () SHUE, LARRY, 7030 RICHARD SARASOTA, FL		Title: Name: Address: City-St-Zip:	D (X) Change () A SHUE, LARRY, 2418 SUNNYSIDE LANE SARASOTA, FL 34239	Addition	
Title:	TD ()	Delete	Title:	() Change () A	Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: RICHARD SHUE PD 03/11/2009