

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 27, 2006 8:00 am**  
**Secretary of State**

03-27-2006 90253 026 \*\*\*\*61.25

**DOCUMENT # N00000001208**

1. Entity Name  
**SHADDAI TEMPLE HOLDING CORPORATION**



Principal Place of Business  
1101 W. 19TH ST.  
PANAMA CITY, FL 32405

Mailing Address  
P.O. BOX 16115  
PANAMA CITY, FL 32406

4003300-



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01032006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number  
59-2477193

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~SYFRETT, RAYMOND~~  
~~311 MAGNOLIA AVE.~~  
~~PANAMA CITY, FL 32401~~

Name **John R. Green, P.A.**

Street Address (P.O. Box Number is Not Acceptable)

~~216 W. 11th Street~~  
**24 West 8th Street**

City

**Panama City**

FL

Zip Code  
**32401**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*John R. Green*

(NOTE: Registered Agent signature required when reinstating)

*March 28th, 2006*

DATE

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **T** ☐ Delete  
NAME **BAAS, H. RON**  
STREET ADDRESS **1101 W. 19TH ST.**  
CITY-ST-ZIP **PANAMA CITY, FL 32405**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **SD** ☐ Delete  
NAME **MILLER, RONALD R**  
STREET ADDRESS **1101 W. 19TH ST.**  
CITY-ST-ZIP **PANAMA CITY, FL 32405**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☒ Delete  
NAME **ODOM, MIKE**  
STREET ADDRESS **7938 WESTWOOD AVE**  
CITY-ST-ZIP **PANAMA CITY, FL 32404**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Delete  
NAME **MATCHKUS, JAMES**  
STREET ADDRESS **7246 SOUTH LAKE JOANNA DRIVE**  
CITY-ST-ZIP **PANAMA CITY, FL 32404**

TITLE ☐ Change ☒ Addition  
NAME **MARK Krautheim**  
STREET ADDRESS **2240 SEWANEE ST.**  
CITY-ST-ZIP **LYNN HAVEN, FL 32444**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Ronald R. Miller* **Ronald R. Miller** 3-14-06 850-769-8303  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #