

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008246

FILED  
Jun 10, 2008  
Secretary of State

Entity Name: SHAUN ADAMS FOUNDATION, INC.

## Current Principal Place of Business:

1416 NEW YORK AVE  
A  
LYNN HAVEN, FL 32444 US

## New Principal Place of Business:

## Current Mailing Address:

2310 S. HWY. 77  
STE 110 PMB 157  
LYNN HAVEN, FL 32444 US

## New Mailing Address:

FEI Number: 71-1010463 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

WILLIAMS, ANTHONY T  
1416 NEW YORK AVE APT A  
LYNN HAVEN, FL 32444 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: P ( ) Delete  
Name: SHAUN, ADAMS W  
Address: 1416 NEW YORK AVE.APT A  
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: VP ( ) Delete  
Name: WILLIAMS, ANTHONY T  
Address: 1416 NEW YORK AVE APT A  
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: TRES ( ) Delete  
Name: ROBERT PAXTON,  
Address: 1310 S INVERNESS RD  
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: SEC ( ) Delete  
Name: GRAHAM SHAW,  
Address: 2101 SHAMROCK LANE  
City-St-Zip: LYNN HAVEN, FL 32444

Title: OFF ( ) Delete  
Name: AMANDA BAKER,  
Address: 1532 OAK AVE. APT A  
City-St-Zip: PANAMA CITY, FL 32405

Title: OFF ( ) Delete  
Name: AMIR LIZARRAGA,  
Address: 101 HERITAGR CR.  
City-St-Zip: PANAMA CITY BEACH, FL 32407 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TRES (X) Change ( ) Addition  
Name: SHAMAIN RIDGEWAY,  
Address: 406 E.19TH ST.  
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: OFF (X) Change ( ) Addition  
Name: CONNIE TEETS,  
Address: 2607 GRANT AVE, LOT 6  
City-St-Zip: PANAMA CITY, FL 32405

Title: OFF (X) Change ( ) Addition  
Name: AMIR LIZARRAGA,  
Address: 101 HERITAGE CR.  
City-St-Zip: PANAMA CITY BEACH, FL 32407 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHAUN ADAMS

P

06/10/2008

Electronic Signature of Signing Officer or Director

Date