2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P0000001601

Entity Name: GERALD F. SHINN, CPA, P.A.

FILED Jan 11, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5800 OVERSEAS HWY
UNIT NUMBER 23
UNIT NUMBER 16
MARATHON, FL 33050

5800 OVERSEAS HWY
UNIT NUMBER 16
MARATHON, FL 33050

Current Mailing Address: New Mailing Address:

5800 OVERSEAS HWY
UNIT NUMBER 23
UNIT NUMBER 16
MARATHON, FL 33050
MARATHON, FL 33050

FEI Number: 65-0973306 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHINN, GERALD F
5800 OVERSEAS HWY
UNIT NUMBER 23
UNIT NUMBER 16
MARATHON, FL 33050 US
SHINN, GERALD F
5800 OVERSEAS HWY
UNIT NUMBER 16
MARATHON, FL 33050 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: 01/11/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: SHINN, GERALD F

Address: 5800 OVERSEAS HWY, #23
City-St-Zip: MARATHON, FL 33050

Title: VPSD () Delete Name: SHINN, MARIAN J

Address: 5800 OVERSEAS HWY, #23
City-St-Zip: MARATHON, FL 33050

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition

Name: SHINN, GERALD F Address: 5800 OVERSEAS HWY, #16 City-St-Zip: MARATHON, FL 33050

Title: VPSD (X) Change () Addition

Name: SHINN, MARIAN J

Address: 5800 OVERSEAS HWY, #16 City-St-Zip: MARATHON, FL 33050

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GERALD F. SHINN PRES 01/11/2005