2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000024510

Entity Name: AAA SHOFF-PARSLEY, INC.

FILED Jul 07, 2006 Secretary of State

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

2510 SHOFF LANE 2080 HARLOCK ROAD MELBOURNE, FL 32940 MELBOURNE, FL 32934

Current Mailing Address: New Mailing Address:

2510 SHOFF LANE 2080 HARLOCK ROAD MELBOURNE, FL 32940 MELBOURNE, FL 32934

FEI Number: 59-3634421 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:

PARSLEY, ROXANNE M
2510 SHOFF LANE
MELBOURNE, FL 32940 US
PARSLEY, ROXANNE M
2080 HARLOCK ROAD
MELBOURNE, FL 32934 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: ROXANNE PARSLEY 07/07/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPTS () Delete Title: DPTS (X) Change () Addition PARSLEY, ROXANNE M PARSLEY, ROXANNE M Name: Name: 2510 SHOFF LANE 2080 HARLOCK ROAD Address: Address: MELBOURNE, FL 32934 City-St-Zip: MELBOURNE, FL 32940 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 PARSLEY, HIRAM
 Name:
 PARSLEY, HIRAM

 Address:
 2510 SHOFF LANE
 Address:
 2080 HARLOCK ROAD

 City-St-Zip:
 MELBOURNE, FL 32940
 City-St-Zip:
 MELBOURNE, FL 32934

Title: () Delete Title: S () Change (X) Addition

 Name:
 Name:
 SHOFF, ROSE M

 Address:
 Address:
 5443 THE WILLOWS DRIVE

 City-St-Zip:
 City-St-Zip:
 MELBOURNE, FL 32934

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: ROXANNE PARSLEY DPTS 07/07/2006