

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000068513

Entity Name: SHIVERN PROPERTIES, INC.

FILED
Jun 02, 2006
Secretary of State

Current Principal Place of Business:

9603 N NEBRASKA AVE, APT D
TAMPA, FL 33612

New Principal Place of Business:

1104 E 140TH AVE,
B
TAMPA, FL 33613

Current Mailing Address:

P O BOX 272958
TAMPA, FL 33688

New Mailing Address:

FEI Number: 59-3663185

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GOODING, GARNET T
9603 N NEBRASKA AVE, APT D
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

GOODING, GARNET T
1104 E. 140TH AVE,
B
TAMPA, FL 33613 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: GARNET GOODING

06/02/2006

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:

Title: P () Delete
Name: GOODING, GARNET
Address: 9603 N NEBRASKA AVE APT D
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GOODING, GARNET
Address: 1104E 140TH AVE, APT B
City-St-Zip: TAMPA, FL 33612

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: GARNET GOODING

PSTD

06/02/2006

Electronic Signature of Signing Officer or Director

Date