

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000107980

Entity Name: DIANA KRISTIN SHEA, P.A.

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

166 N A1A
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

135 PROFESSIONAL DRIVE
SUITE 101
PONTE VEDRA BEACH, FL 32082

Current Mailing Address:

POST OFFICE BOX 6
PONTE VEDRA BEACH, FL 32004

New Mailing Address:

FEI Number: 59-3754248 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEA, DIANA KRISTIN
166 N A1A
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

SHEA, DIANA KRISTIN
135 PROFESSIONAL DRIVE
SUITE 101
PONTE VEDRA BEACH, FL 32082 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: _____

Electronic Signature of Registered Agent

04/28/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHEA, DIANA KRISTIN
Address: 166 N A1A
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SHEA, DIANA KRISTIN
Address: 135 PROFESSIONAL DRIVE, SUITE 101
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: DIANA KRISTIN SHEA

D

04/28/2005

Electronic Signature of Signing Officer or Director

Date