

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

04-22-2002 90124 033 ***158.75

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P020000026363
1. Entity Name
Shauna Ginn, Inc.

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business
3355 Songbird Lane
Suite, Apt. #, etc.

3. Mailing Address
3355 Songbird Ln.
Suite, Apt. #, etc.

City & State
Lakeland FL
Zip 33811 Country Polk

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Lakeland FL
Zip 33811 Country Polk

4. FEI Number
52-2311480
Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

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7. Name and Address of Current Registered Agent
Name Lashauna M. Ginn
Street Address (P.O. Box Number is Not Acceptable)
3355 Songbird Ln
City Lakeland FL Zip Code 33811

8. 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 L.M. Ginn Resident DATE 4-10-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☒
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>President</u> <u>Lashauna M. Ginn (P)</u> <u>3355 Songbird Ln</u> <u>Lakeland, FL 33811</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE L.M. Ginn Res. 4/10/02 813-727-8350