2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004
Secretary of State

DOCUMENT# P02000091455

Entity Name: SHADOW PROPERTIES, INC.

Current Principal Place of Business:

5337 CENTRAL AVE.
SAINT PETERSBURG, FL 33710

New Principal Place of Business:

147 N. BELCHER ROAD
SUITE 3
LARGO, FL 33771

Current Mailing Address:

5337 CENTRAL AVE.
SAINT PETERSBURG, FL 33710

New Mailing Address:

147 N BELCHER ROAD
SUITE3
LARGO, FL 33771

FEI Number: 54-2072005 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PATRICK M., O'CONNOR
2240 BELLEAIR ROAD
SUITE 160
CLEARWATER, FL 33764 US

Name and Address of New Registered Agent:

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 — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MCCALL, TONY
Address: 5337 CENTRAL AVE.
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MCCALL, TONY
Address: 147 N BELCHER ROAD
City-St-Zip: LARGO, FL 33771

Title: VP ( ) Change (X) Addition
Name: MCCALL, TONY
Address: 147 BELCHER ROAD
City-St-Zip: LARGO, FL 33771

Title: S,T ( ) Change (X) Addition
Name: SMITH, ANN
Address: 147 BELCHER ROAD
City-St-Zip: LARGO, FL 33771

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: TONY MCCAL P 04/26/2004

Electronic Signature of Signing Officer or Director — Date