

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000135204

Entity Name: SHOF, INC.

FILED  
Apr 10, 2009  
Secretary of State

**Current Principal Place of Business:**

1024 PONDEROSA ROAD  
VENICE, FL 34293 US

**New Principal Place of Business:**

36 CHURCH STREET  
OSPREY, FL 34229 US

**Current Mailing Address:**

1024 PONDEROSA ROAD  
VENICE, FL 34293 US

**New Mailing Address:**

36 CHURCH STREET  
OSPREY, FL 34229 US

FEI Number: 82-0579717

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHOFNER, WILLIAM K  
1024 PONDEROSA RD  
VENICE, FL 34293 US

**Name and Address of New Registered Agent:**

SHOFNER, WILLIAM K  
36 CHURCH STREET  
OSPREY, FL 34229 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: WILLIAM K SHOFNER

04/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SHOFNER, WILLIAM K  
Address: 1024 PONDEROSA ROAD  
City-St-Zip: VENICE,, FL 34293 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: SHOFNER, WILLIAM K  
Address: 36 CHURCH STREET  
City-St-Zip: OSPREY, FL 34229 US

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM K SHOFNER

PRES

04/10/2009

Electronic Signature of Signing Officer or Director

Date